02/19/2007 10:38

Image# 27960062644

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee Office Use Only 1. NAME OF **USE FEC MAILING LABEL** Example:If typing, type COMMITTEE (in full) OR TYPE OR PRINT over the lines American College of Radiology Association 1891 Preston White Drive ADDRESS (number and street) Check if different than previously Reston VA 20191 reported. (ACC) FEC IDENTIFICATION NUMBER STATE. ZIPCODE 🛋 CITY A IS THIS NEW **AMENDED** C00343459 Х REPORT OR (N) (A) **TYPE OF REPORT** (b) Monthly Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug 20 (M8) (Non-Election Year Only) Report (Choose One) Due On: Dec 20 (M12) (Non-Election Year Only) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) (a) Quarterly Reports: Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) April 15 Quarterly Report(Q1) (c) 12-Day Primary (12P) General (12G) Runoff (12R) July 15 PRE-Election Quarterly Report(Q2) Report for the: Convention (12C) Special (12G) October 15 Quarterly Report(Q3) January 31 Quarterly Report(YE) in the Election on State of July 31 Mid-Year (d) 30-Day Report(Non-election Year Only) (MY) Post -Election General (30G) Runoff (30R) Special (30S) Report for the: **Termination Report** (TER) in the Election on State of 0 1 0 1 2007 0 1 3 1 2007 Covering Period through I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. DR Milton Guiberteau Type or Print Name of Treasurer Electronically Filed by DR Milton Guiberteau 02 19 2007 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g. Office **FEC FORM 3X** Use (Rev. 02/2003) Only

Image# 27960062645

FEC Form 3X (Rev. 02/2003)

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS Page 2

Write or Type Committee Name American College of Radiology Association D D " D 0 1 0 1 2007 0 1 3 1 2007 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand [°]2007 365524.77 January 1 (b) Cash on Hand at 365524.77 Begining of Reporting Period 209394.39 209394.39 (c) Total Receipts (from Line 19) (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 574919.16 574919.16 6(a) and 6(c) for Column B) 15791.52 15791.52 7. Total Disbursements (from Line 31) Cash on Hand at Close of Reporting Period 559127.64 559127.64 (subtract Line 7 from Line 6(d)) 9. Debts and Obligations owed the committee (Itemize all on Schedule C and/or Schedule D) 0.00 10. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) This Committee has qualified as a multicandidate committee. (see FEC FORM 1M) For further information contact: Federal Election Commission 999 E street, NW

Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 02/2003) Page 3

Write or Type Committee Name
American College of Radiology Association

Report Covering the Period:

From:

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м м 0 1 ^D 3 1

^Y 2007

	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11.	Contributions (other than loans) From: (a) Individuals/Persons Other		
	Than Political Committees (i) Itemized (use Schedule A)	183440.00	183440.00
	(ii) Unitemized	24886.55	24886.55
	(iii) TOTAL (add Lines 11(a)(i) and (ii)	208326.55	208326.55
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees (such as PACs)	0.00	0.00
	11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	208326.55	208326.55
2.	Transfers From Affiliated/Other Party Committees	0.00	0.00
3.	All Loans Received	0.00	0.00
	Loan Repayments Received Offsets To Operating Expenditures	0.00	0.00
6.	(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
	to Federal candidates and Other Political Committees	0.00	0.00
7.	Other Federal Receipts (Dividends, Interest, etc.)	1067.84	1067.84
8.	Transfers from Non-Federal and Levin Funds		
	(a) Non-Federal Account (from Schedule H3)	0.00	0.00
	(b) Levin Funds (from Schedule H5)	0.00	0.00
	(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19.	Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	209394.39	209394.39
20.	Total Federal Receipts (subtract Line 18(c) from Line 19)	209394.39	209394.39

from Line 31).....

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003) Page 4 **COLUMN A COLUMN B II. DISBURSEMENTS Total This Period** Calendar Year-to-Date 21. Operating Expenditures: (a) Shared Federal/Non-Federal Activity (from Schedule H4) 0.00 0.00 (i) Federal Share..... 0.00 0.00 (ii) Non-Federal Share..... (b) Other Federal Operating 0.00 0.00 Expenditures..... (c) Total Operating Expenditures 0.00 0.00 (add 21(a)(i), (a)(ii) and (b))............ 22. Transfers to Affiliated/Other Party 0.00 0.00 Committees..... Contributions to 23. Federal Candidates/Committees.....and Other Political Committees..... 14000.00 14000.00 24. Independent Expenditure 0.00 0.00 0.00 0.00 0.00 0.00 26. Loan Repayments Made..... 0.00 0.00 27. Loans Made..... 28. Refunds of Contributions To: Individuals/Persons Other 0.00 0.00 Than Political Committees 0.00 0.00 (b) Political Party Committees (c) Other Political Committees 0.00 0.00 (such as PACs) (d) Total Contribution Refunds 0.00 0.00 (add Lines 28(a), (b), and (c)) 1791.52 1791.52 29. Other Disbursements..... 30. Federal Election Activity (2 U.S.C 431(20)) (a) Shared Federal Election Activity (from Schedule H6) 0.00 0.00 (i) Federal Share 0.00 0.00 (ii) "Levin" Share (b) Federal Election Activity Paid Entirely 0.00 0.00 With Federal Funds (c) Total Federal Election Activity (add 0.00 0.00 Lines 30(a)(i), 30(a)(ii) and 30(b)).... 31. Total Disbursements (add Lines 21(c), 22, 15791.52 15791.52 23, 24, 25, 26, 27, 28(d), 29 and 30(c)).. 32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii)

15791.52

15791.52

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date				
33. Total Contributions (other than loans) from Line 11(d), page 3)	208326.55	208326.55				
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00				
S5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	208326.55	208326.55				
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00				
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00				
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00				

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 6 / 128							
	EMIZED RECEIPTS		or each category of the	(check only one)							
11	EMIZED RECEIP 13		Detailed Summary Page	X 11a 11b 11c 12							
_			, ,	13 14 15 16 17							
Ar or	ly information copied from such Reports and Sta for commercial purposes, other than using the n	itements may name and add	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.							
abla	NAME OF COMMITTEE (In Full)										
\rangle	American College of Radiology Associa	tion									
Α.	Full Name (Last, First, Middle Initial) DR Merle Edwards			Date of Receipt							
	Mailing Address 4110 Cottonwood Dr			$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$							
	City	State	Zip Code	Transaction ID: 18332834							
	Eau Claire	WI	54701-7417	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	C		500.00							
	Name of Employer Medical X-Ray Consultants	Occupation Diagnost	n ic Radiologist								
	Receipt For:	Aggregate	e Year-to-Date ▼	7							
	Primary General		500.00	1							
	Other (specify) ▼		500.00								
В.	Full Name (Last, First, Middle Initial) DR Edwin Boren, JR			Date of Receipt							
	Mailing Address 914 Glen Rose Dr	$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$									
	City	State	Zip Code	Transaction ID: 18332837							
	Allen	TX	75013-1126	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		250.00							
	Name of Employer Texas Radiology Associates	Occupation	n ic Radiologist	7							
	Receipt For:	<u> </u>	e Year-to-Date ▼								
	Primary General	33 -3		1							
	Other (specify)		250.00]							
<u> </u>	Full Name (Last, First, Middle Initial) DR Sophia Peterman			Date of Receipt							
	Mailing Address 487 Burlington Rd NE			$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$							
	City	State	Zip Code	Transaction ID: 18332851							
	Atlanta	GA	30307-1103	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	C		300.00							
	Name of Employer Northwest Radiology Consultants										
	Receipt For:	Aggregate	e Year-to-Date ▼								
	Primary General			1							
	Other (specify) ▼		300.00]							
S	UBTOTAL of Receipts This Page (optional)			1050.00							
\vdash	22.2.7.2 or recoupte this rage (optional)			-							

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 7 / 128					
	EMIZED RECEIPTS		or each category of the	(check only one)					
•			Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17					
An	y information copied from such Reports and State for commercial purposes, other than using the na	ements may ame and add	not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions					
$\overline{}$	NAME OF COMMITTEE (In Full)								
\rangle	American College of Radiology Associati	ion							
۹.	Full Name (Last, First, Middle Initial) DR Richard Kutilek			Date of Receipt					
	Mailing Address 1853 S 107th St		7.0.1	01 04 2007					
	City Omaha	State NE	Zip Code 68124-1065	Transaction ID: 18332854 Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C	00124 1003	250.00					
	Name of Employer Radiological Center Inc.	Occupation Diagnost	n ic Radiologist						
	Receipt For:		Year-to-Date ▼						
	Primary General Other (specify) ▼	0 0	250.00						
3.	Full Name (Last, First, Middle Initial) DR John Melvin			Date of Receipt					
	Mailing Address John T Melvin MD & Asso PO Box 854			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					
	City Henderson	State TX	Zip Code 75653-0854						
	FEC ID number of contributing		73033-0634	Amount of Each Receipt this Period					
	federal political committee.	C		250.00					
	Name of Employer John T Melvin MD & Assoc	Occupation	n ic Radiologist						
	Receipt For:		Year-to-Date V						
	Primary General		250.00						
	Other (specify) ▼		230.00						
Э.	Full Name (Last, First, Middle Initial) DR David Walker			Date of Receipt					
	Mailing Address 8040 Woodpecker Trl			01 / 04 / 2007					
	City	State	Zip Code	Transaction ID: 18332859					
	<u>Jacksonville</u>	FL	32256-7333	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		250.00					
	Name of Employer Mayo Clinic Jacksonville		ic Radiologist						
	Receipt For: Primary General	Aggregate	Year-to-Date ▼						
	Other (specify) ▼	0 0	250.00						
s	UBTOTAL of Receipts This Page (optional)			750.00					
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T	OTAL This Period (last page this line number onl	ly)							

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 8 / 128						
ITEMIZED RECEIPTS		or each category of the	(check only one)						
TEMIZED RESENTS		Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17						
Any information copied from such Reports and St or for commercial purposes, other than using the	atements may	r not be sold or used by any perso lress of any political committee to	on for the purpose of soliciting contributions						
NAME OF COMMITTEE (In Full)									
American College of Radiology Associa	ation								
Full Name (Last, First, Middle Initial) A. DR Arthur Clark			Date of Receipt						
Mailing Address 6323 E Gold Dust Ave			01 04 7 2007						
City	State	Zip Code	Transaction ID: 18332860						
Scottsdale	AZ	85253-1239	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		500.00						
Name of Employer Arizona Medical Imaging	Occupation Diagnost	n c Radiologist							
Receipt For: Primary General	Aggregate	Year-to-Date ▼	,						
Other (specify) ▼		500.00							
Full Name (Last, First, Middle Initial) 3. DR Donald Paquet			Date of Receipt						
Mailing Address Associated Radiologist 1125 E Southern Ave S			01 04 7 2007						
City	State	Zip Code	Transaction ID: 18332861						
Mesa	AZ	85204-5046	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		700.00						
Name of Employer Self-employed	Occupation Diagnosti	n c Radiologist							
Receipt For:	Aggregate	Year-to-Date ▼							
Primary General Other (specify) ▼	0 0	700.00							
Full Name (Last, First, Middle Initial) DR Calvin Leuschen			Date of Receipt						
Mailing Address 105 Palo Alto			0 1 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y						
City	State	Zip Code	Transaction ID: 18332882						
Boerne	TX	78006-5999	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		500.00						
711101110		n c Radiologist							
		Year-to-Date ▼	-						
Primary General Other (specify) ▼		500.00							
SUBTOTAL of Receipts This Page (optional)			1700.00						
,		-	-						

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 9 / 128							
	EMIZED RECEIPTS		or each category of the	(check only one)							
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Ar or	ly information copied from such Reports and St for commercial purposes, other than using the	atements may name and add	not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions of solicit contributions from such committee.							
\setminus	NAME OF COMMITTEE (In Full)										
	American College of Radiology Associa	ation									
A.	Full Name (Last, First, Middle Initial) DR Jeffrey Buran			Date of Receipt							
	Mailing Address 84 Spit Fire Dr			01 04 2007							
	City	State	Zip Code	Transaction ID: 18332883							
	Plattsburgh	NY	12901-8521	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		365.00							
	Name of Employer Assoc. in Radiology PC, Plattsburgh, N	Occupation Diagnosti	n ic Radiologist								
	Receipt For:		Year-to-Date ▼								
	Primary General	1 1	365.00	7							
	Other (specify)	0 0	303.00								
В.	Full Name (Last, First, Middle Initial) DR Peter Markovic			Date of Receipt							
	Mailing Address VA Medical Center 510 Butler Ave			$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$							
	City	State	Zip Code	Transaction ID: 18332884							
	Martinsburg	WV	25401-9991	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	C		250.00							
	Name of Employer VA Medical Center	Occupation Diagnost	n ic Radiologist								
	Receipt For:	Aggregate	e Year-to-Date ▼								
	Primary General		250.00	7							
	Other (specify)		230.00								
C.	Full Name (Last, First, Middle Initial) DR Douglass Conner			Date of Receipt							
	Mailing Address 232 W Caldwood Dr			01 04 7 2007							
	City	State	Zip Code	Transaction ID: 18332885							
	Beaumont	TX	77707-1930	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	C		365.00							
	Receipt For: Aggreg		n ic Radiologist								
			Year-to-Date ▼								
	Primary General Other (specify) ▼		365.00								
s	UBTOTAL of Receipts This Page (optional)			980.00							
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lτ	OTAL This Period (last page this line number of	only)									

SCHEDULE A (FEC Form 3X)				FOR LINE NUMBER: PAGE 10 / 128							
	•		Use separate schedule(s) or each category of the	(check only one)							
Ш	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12							
				13 14 15 16 17							
An	y information copied from such Reports and Stror commercial purposes, other than using the	atements may	not be sold or used by any perso	on for the purpose of soliciting contributions							
\leftarrow		name and add	iress of any political committee to	solicit contributions from such committee.							
	NAME OF COMMITTEE (In Full)										
Z	American College of Radiology Associa	ation									
Α.	Full Name (Last, First, Middle Initial) DR Lillian Cavin	Date of Receipt									
	Mailing Address 6409 Landmark Drive			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y							
	City	State	Zip Code	Transaction ID: 18333996							
	Alexandria	LA	71301-2344	Amount of Each Receipt this Period							
	FEC ID number of contributing										
	federal political committee.	C		250.00							
	Name of Employer Eagle Radiology, LLC	Occupation	n ic Radiologist								
	Receipt For:		Year-to-Date ▼								
	Primary General			1							
	Other (specify) ▼		250.00								
В.	Full Name (Last, First, Middle Initial) DR Randall Loftus			Date of Receipt							
	Mailing Address 21 Whitestone Ln			M M / D D / Y Y Y							
	01.	01-1-	7'- 0-4-	01 04 2007							
	City	State	Zip Code	Transaction ID: 18334386							
	Lancaster	NY	14086-1421	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		365.00							
	Tederal political committee.										
	Name of Employer Self-Employed	Occupation									
			ic Radiologist								
	Receipt For:	Aggregate	Year-to-Date ▼								
	Primary General	' '	365.00								
	Other (specify) ▼	0 0	1 1 1 1 1 1 1								
— С.	Full Name (Last, First, Middle Initial) DR Glenn Kaplan			Date of Receipt							
	Mailing Address 20941 NE 21st Ct			M M / D D / Y Y Y Y							
				01 05 2007							
	City	State	Zip Code	Transaction ID: 18345425							
	North Miami Beach	FL	33179-1618	Amount of Each Receipt this Period							
	FEC ID number of contributing	С		250.00							
	Name of Employer Sheridan Healthcare Occupation Diagnos			250.00							
			ic Radiologist	_							
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	,							
	Other (specify)		250.00								
	Cario (openity)	-	0 0 0 0 0 0 0	1							
01	JBTOTAL of Receipts This Page (optional)			865.00							
\vdash	age (optional)										

2	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 11 / 128				
			Use separate schedule(s)	(check only one)				
ITI	EMIZED RECEIPTS		or each category of the Detailed Summary Page	X 11a 11b 11c 12				
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An	y information copied from such Reports and State	ements may	not be sold or used by any perso	n for the purpose of soliciting contributions				
or t	or commercial purposes, other than using the na	me and add	dress of any political committee to	solicit contributions from such committee.				
$\overline{\ }$	NAME OF COMMITTEE (In Full)							
\rangle	American College of Radiology Associati	on						
	Full Name (Last, First, Middle Initial) DR Ronald Goldberg			Date of Receipt				
	Mailing Address 15 Nichols Rd			0 1 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
	City	State	Zip Code	Transaction ID: 18345427				
	Cohasset	MA	02025-1167	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		250.00				
	Name of Employer Radiology Assoc. of Plymo- uth	Occupation Diagnosti	n ic Radiologist					
	Receipt For:		Year-to-Date ▼	1				
	Primary General	33 3		1				
	Other (specify) ▼	0 0	250.00					
	Full Name (Last, First, Middle Initial) DR Rafia Saleem			Date of Receipt				
	Mailing Address 20 Kingston Drive	01 05 7 2007						
	City	State	Zip Code	Transaction ID: 18345429				
	Oak Brook	<u>IL</u>	60523-1739	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		250.00				
	Name of Employer Self-employed	Occupation Diagnosti	n ic Radiologist					
	Receipt For:	Aggregate	Year-to-Date 🔻					
	Primary General		050.00					
	Other (specify) ▼	0 0	250.00					
Э.	Full Name (Last, First, Middle Initial) DR Zubin Balsara			Date of Receipt				
	Mailing Address 8309 Canopy Oaks Dr		7:0:	01 05 2007				
	City	State	Zip Code	Transaction ID: 18345431				
	Fort Smith	AR	72903-7012	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		250.00				
	Name of Employer Radiologists P.A.	Occupation Diagnosti	n ic Radiologist					
			Year-to-Date ▼	7				
	Primary General		050.00					
	Other (specify) ▼		250.00					
SI	JBTOTAL of Receipts This Page (optional)	750.00						
т	OTAL This Period (last page this line number onl	v)						

	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 12 / 128
	-		Use separate schedule(s)	(check only one)
IT	EMIZED RECEIPTS		or each category of the Detailed Summary Page	X 11a 11b 11c 12
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An	y information copied from such Reports and Sta	tements may	not be sold or used by any perso	on for the purpose of soliciting contributions
or i	for commercial purposes, other than using the n	ame and add	dress of any political committee to	solicit contributions from such committee.
$\overline{\ }$	NAME OF COMMITTEE (In Full)			
\rangle	American College of Radiology Associa	tion		
_	Full Name (Lost First Middle Initial)			
۸.	Full Name (Last, First, Middle Initial) Dr. George O. Mead			Date of Receipt
	Mailing Address Putnam Radiolog Pc			M M / D D / Y Y Y Y
	315 N Washington Aver	ue Suite 2	09	01 05 2007
	City	State	Zip Code	Transaction ID: 18345434
	Cookeville	TN	38501-2660	Amount of Each Receipt this Period
	FEC ID number of contributing			050.00
	federal political committee.	C		250.00
	Name of Employer Putnam Radiology, PC	Occupation	n	
	Putnam Radiology, PC	Diagnost	ic Radiologist	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General	1 1	050.00	1
	Other (specify)		250.00	
	Full Name (Last, First, Middle Initial)			Date of Boardat
	DR Gregory Smith			Date of Receipt
	Mailing Address 7810 Bamby Rd			01 05 2007
	City	State	Zip Code	Transaction ID: 18345435
	Cumming	GA	30041-8100	Amount of Each Receipt this Period
	_	αл	30041-8100	Amount of Each Neceipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Quantum Radiology, N.W.	Occupation	n	
		D:	ic Radiologist	
		Diagnost		
	Receipt For:	. · ·	e Year-to-Date ▼	7
	Receipt For: Primary General	. · ·		1
	Receipt For:	. · ·	e Year-to-Date ▼ 250.00	
	Receipt For: Primary General Other (specify) ▼	. · ·		
	Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial)	. · ·		Date of Receipt
Э.	Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) DR David Chaffin	. · ·		Date of Receipt
Э.	Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial)	. · ·		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Э.	Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) DR David Chaffin	. · ·		M M / D D / Y Y Y Y
Э.	Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) DR David Chaffin Mailing Address 3881 Clairmont Dr NE	Aggregate	250.00	0 1 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Э.	Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) DR David Chaffin Mailing Address 3881 Clairmont Dr NE City	Aggregate State TN	250.00 Zip Code	Transaction ID: 18345437 Amount of Each Receipt this Period
Э.	Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) DR David Chaffin Mailing Address 3881 Clairmont Dr NE City Cleveland	Aggregate	250.00 Zip Code	0 1 0 5 2 0 0 7 Transaction ID: 18345437
Э.	Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) DR David Chaffin Mailing Address 3881 Clairmont Dr NE City Cleveland FEC ID number of contributing federal political committee.	Aggregate State TN C	Zip Code 37312-5124	Transaction ID: 18345437 Amount of Each Receipt this Period
Э.	Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) DR David Chaffin Mailing Address 3881 Clairmont Dr NE City Cleveland FEC ID number of contributing	Aggregate State TN C	Zip Code 37312-5124	Transaction ID: 18345437 Amount of Each Receipt this Period
C.	Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) DR David Chaffin Mailing Address 3881 Clairmont Dr NE City Cleveland FEC ID number of contributing federal political committee. Name of Employer Self-Employed	State TN C Occupatio Diagnost	Zip Code 37312-5124	Transaction ID: 18345437 Amount of Each Receipt this Period
C.	Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) DR David Chaffin Mailing Address 3881 Clairmont Dr NE City Cleveland FEC ID number of contributing federal political committee. Name of Employer Self-Employed Receipt For:	State TN C Occupatio Diagnost	Zip Code 37312-5124	Transaction ID: 18345437 Amount of Each Receipt this Period
C.	Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) DR David Chaffin Mailing Address 3881 Clairmont Dr NE City Cleveland FEC ID number of contributing federal political committee. Name of Employer Self-Employed	State TN C Occupatio Diagnost	Zip Code 37312-5124	Transaction ID: 18345437 Amount of Each Receipt this Period
C.	Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) DR David Chaffin Mailing Address 3881 Clairmont Dr NE City Cleveland FEC ID number of contributing federal political committee. Name of Employer Self-Employed Receipt For: Primary General	State TN C Occupatio Diagnost	Zip Code 37312-5124 n ic Radiologist e Year-to-Date ▼	Transaction ID: 18345437 Amount of Each Receipt this Period
C.	Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) DR David Chaffin Mailing Address 3881 Clairmont Dr NE City Cleveland FEC ID number of contributing federal political committee. Name of Employer Self-Employed Receipt For: Primary General	State TN C Occupatio Diagnost	Zip Code 37312-5124 n ic Radiologist e Year-to-Date ▼	Transaction ID: 18345437 Amount of Each Receipt this Period 250.00
C.	Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) DR David Chaffin Mailing Address 3881 Clairmont Dr NE City Cleveland FEC ID number of contributing federal political committee. Name of Employer Self-Employed Receipt For: Primary General Other (specify) ▼	State TN C Occupatio Diagnost Aggregate	Zip Code 37312-5124 nic Radiologist e Year-to-Date ▼ 250.00	Transaction ID: 18345437 Amount of Each Receipt this Period 250.00
C.	Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) DR David Chaffin Mailing Address 3881 Clairmont Dr NE City Cleveland FEC ID number of contributing federal political committee. Name of Employer Self-Employed Receipt For: Primary General	State TN C Occupatio Diagnost Aggregate	Zip Code 37312-5124 n ic Radiologist e Year-to-Date ▼ 250.00	Transaction ID: 18345437 Amount of Each Receipt this Period 250.00

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	SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	(check only one)							
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			Detailed Summary Page	13 14 15 16 17							
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or	for commercial purposes, other than using the	name and add	dress of any political committee to	o solicit contributions from such committee.							
	NAME OF COMMITTEE (In Full)										
$ \rangle$	American College of Radiology Associa	ation									
	Full Name (Last, First, Middle Initial)										
A.	DR Michael Mitchell			Date of Receipt							
	Mailing Address 2216 River Woods Driv	re .		01 05 2007							
	City	State	Zip Code								
	Naperville	IL	60565-6350	Transaction ID: 18345439							
		IL.	60363-6330	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	C		250.00							
	rederal political committee.										
	Name of Employer Naperville Radiologist,	Occupation									
	SC .	Diagnost	ic Radiologist								
	Receipt For:	Aggregate	e Year-to-Date ▼								
	Primary General		250.00	7							
	Other (specify)		200.00	1							
B.	Full Name (Last, First, Middle Initial) DR Ajay Goyal			Date of Receipt							
	Mailing Address 8028 Plantation Lakes	M M / D D / Y Y Y Y									
	5020 Flamation Lancs		01 05 2007								
	City	State	Zip Code	Transaction ID: 18345441							
	Port Saint Lucie	FL	34986-3013	Amount of Each Receipt this Period							
	FEC ID number of contributing		1 1 1 1 1	500.00							
	federal political committee.	C		500.00							
	Name of Employer	Occupation	<u> </u>	\dashv							
	Self-employed	1	ic Radiologist								
	Receipt For:		e Year-to-Date ▼	\dashv							
	Primary General	7 1991 09410	Tour to Bate V	7							
	Other (specify)	l	500.00								
				-							
_	Full Name (Last, First, Middle Initial)										
C.	DR Robert Wolek			Date of Receipt							
	Mailing Address 31 Dairy Hill Rd			01 05 2007							
	City	State	Zip Code	Transaction ID: 18345443							
	Madison	CT	06443-2491	Amount of Each Receipt this Period							
			00110 2101								
	FEC ID number of contributing federal political committee.			365.00							
	·										
			ic Radiologist	_							
	Receipt For:	Aggregate	e Year-to-Date ▼								
	Primary General Other (specify) ▼		365.00								
	□ Other (specify) ▼	0 0	0 0 0 0 0 0 0	1							
_	UBTOTAL of Receipts This Page (optional)			1115.00							
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5	CHEDULE A (FEC Form 3X)	Use separate schedule(s)		(check only one)						
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\setminus	NAME OF COMMITTEE (In Full)									
	American College of Radiology Associa	ation								
Α.	Full Name (Last, First, Middle Initial) DR Henry Wang	Date of Receipt								
	Mailing Address 12 Coach Side Ln			01 05 7 2007						
	City	State	Zip Code	Transaction ID: 18345445						
	Pittsford	NY	14534-9413	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	C		250.00						
	Name of Employer Univ of Rochester Medical Ctr Receipt For:		n ic Radiologist • Year-to-Date ▼							
	Primary General Other (specify) ▼	Aggregate	250.00							
В.	Full Name (Last, First, Middle Initial) DR Steven DePrima			Date of Receipt						
	Mailing Address 430 Rovino Ave	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y								
	City	State	Zip Code	Transaction ID: 18345669						
	Coral Gables	FL	33156-4261	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		2500.00						
	Name of Employer Self-employed	_ · _ ·	ic Radiologist							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2500.00]						
<u> </u>	Full Name (Last, First, Middle Initial) DR Leah Schafer			Date of Receipt						
	Mailing Address 128 Congdon St Apt 3			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y						
	City	State	Zip Code	Transaction ID: 18345670						
	Providence	RI	02906-1413	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	C		250.00						
	Name of Employer Rhode Island Medical Imag- ing Receipt For:	Diagnostic Radiologist								
	Primary General Other (specify) ▼	Aggregate	250.00]						
s	UBTOTAL of Receipts This Page (optional)			3000.00						
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S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR L	INE N	UMBE	R:	PAG	E 15/	128			
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Ar or	ny information copied from such Reports and Stator commercial purposes, other than using the r	atements may name and ado	not be sold or used by any perso dress of any political committee to	on for the solicit co	purpos ntributi	e of so	oliciti om s	ng con uch co	tribution mmittee	s			
\setminus	NAME OF COMMITTEE (In Full)												
	American College of Radiology Associa	ation											
Α.	Full Name (Last, First, Middle Initial) DR Anthony Pappas			Date of Receipt									
	Mailing Address 685 Hazeltine Ave SE				0 1 0 5 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y								
	City	State	Zip Code	Trai	nsacti	on ID:	183	34567	1				
	Salem	OR	97306-9357	Am	ount o	f Each	Rec	eipt thi	s Period	Ī			
	FEC ID number of contributing federal political committee.	C							365.	00			
	Name of Employer Willamette Valley Radiolo- gy		ic Radiologist										
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 365.00]									
В.	Full Name (Last, First, Middle Initial) DR David Frolich	Dat	te of R	eceipt									
	Mailing Address PO Box 28590		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y										
	City	Zip Code	Transaction ID: 18345672										
	Macon	31221-8590	Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	C		1000.00									
	Name of Employer Radiology Assoc. of Macon	Occupation Diagnosti	n ic Radiologist										
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00	1									
_	Full Name (Last, First, Middle Initial)			-									
C.	DR Cody Cox			_	te of R								
	Mailing Address 4702 111th St		M O	1 M	1	0	/ Y .	200					
	City	State	Zip Code	Trai	nsacti	on ID:	183	38210					
	Lubbock	TX	79424-7359 Amount of Each Receipt							1			
	FEC ID number of contributing federal political committee.		500.00					00					
	Name of Employer Lubbock Diagnostic Radiol- ogy												
	Receipt For:	Aggregate	Year-to-Date ▼										
	Primary General Other (specify) ▼	0 0	500.00										
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Any information copied from such Reports and Statements may not be sold or used by any person for for commercial purposes, other than using the name and address of any political committee to so NAME OF COMMITTEE (In Full) American College of Radiology Association Full Name (Last, First, Middle Initial) DR William Green Mailing Address 2408 Skyline Pt City State Zip Code Jonesboro AR 72404-8079	FOR LINE NUMBER: PAGE 16 / 128 (check only one) X 11a 11b 11c 12 13 14 15 16 17 for the purpose of soliciting contributions solicit contributions from such committee. Date of Receipt M M O 1 1 0 2 0 0 7 Transaction ID: 18382105 Amount of Each Receipt this Period 365.00
Any information copied from such Reports and Statements may not be sold or used by any person for for commercial purposes, other than using the name and address of any political committee to so NAME OF COMMITTEE (In Full) American College of Radiology Association Full Name (Last, First, Middle Initial) DR William Green Mailing Address 2408 Skyline Pt City State Zip Code Jonesboro AR 72404-8079	13 14 15 16 17 for the purpose of soliciting contributions solicit contributions from such committee. Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Any information copied from such Reports and Statements may not be sold or used by any person for for commercial purposes, other than using the name and address of any political committee to so NAME OF COMMITTEE (In Full) American College of Radiology Association Full Name (Last, First, Middle Initial) DR William Green Mailing Address 2408 Skyline Pt City State Zip Code Jonesboro AR 72404-8079	Date of Receipt M M J D D C 2 0 0 7 Transaction ID: 18382105 Amount of Each Receipt this Period
or for commercial purposes, other than using the name and address of any political committee to so NAME OF COMMITTEE (In Full) American College of Radiology Association Full Name (Last, First, Middle Initial) DR William Green Mailing Address 2408 Skyline Pt City State Zip Code Jonesboro AR 72404-8079	Date of Receipt M M M D D D D D D D D D D D D D D D D
American College of Radiology Association Full Name (Last, First, Middle Initial) DR William Green Mailing Address 2408 Skyline Pt City State Zip Code Jonesboro AR 72404-8079	0 1 1 0 2 0 0 7 Transaction ID: 18382105 Amount of Each Receipt this Period
Full Name (Last, First, Middle Initial) DR William Green Mailing Address 2408 Skyline Pt City State Zip Code Jonesboro AR 72404-8079	0 1 1 0 2 0 0 7 Transaction ID: 18382105 Amount of Each Receipt this Period
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City State Zip Code Jonesboro AR 72404-8079	0 1 1 0 2 0 0 7 Transaction ID: 18382105 Amount of Each Receipt this Period
Jonesboro AR 72404-8079	Amount of Each Receipt this Period
FFC ID assert of a satisfaction	
FFO ID records an of a contribution	365.00
FEC ID number of contributing federal political committee.	
Name of Employer Associated Radiologist Lt- d. Occupation Diagnostic Radiologist	
Receipt For: Aggregate Year-to-Date ▼	
Primary General 365.00	
Other (specify) ▼	
Full Name (Last, First, Middle Initial) DR Timothy Cotter	Date of Receipt
Mailing Address 818 1/2 Forest Ave Apt B2	01 10 2007
City State Zip Code	Transaction ID: 18382144
<u>Evanston</u> IL 60202-2417	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	250.00
Name of Employer Memorial X-Ray Services Occupation Diagnostic Radiologist	
Receipt For: Aggregate Year-to-Date ▼	
Primary General 250.00	
Other (specify) ▼	
Full Name (Last, First, Middle Initial) DR Eleanor Smergel	Date of Receipt
Mailing Address 315 Evans Ave	01 10 2007
City State Zip Code	Transaction ID: 18382146
Haddonfield NJ 08033-3807	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	250.00
Name of Employer Tenet Health Corp. Diagnostic Rediclosist	
Diagnostic Hadiologist	
Receipt For: Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼ 250.00	
Other (specify)	
SUBTOTAL of Receipts This Page (optional)	865.00
TOTAL This Period (last page this line number only)	

2	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 17 / 128
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IT	EMIZED RECEIPTS		or each category of the Detailed Summary Page	X 11a 11b 11c 12
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An	y information copied from such Reports and Stat	ements may	not be sold or used by any perso	n for the purpose of soliciting contributions
or	for commercial purposes, other than using the na	me and add	dress of any political committee to	solicit contributions from such committee.
$\overline{\ }$	NAME OF COMMITTEE (In Full)			
\rangle	American College of Radiology Association	ion		
_	Full Name (Last, First, Middle Initial) DR Kevin Cregan			Date of Receipt
٠.	Mailing Address Wayne Radiologists			M M / D D / Y Y Y Y
	2700 Medical Office Place	e		01 10 2007
	City	State	Zip Code	Transaction ID: 18382147
	Goldsboro	NC	27534-9460	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		250.00
	Name of Employer Wayne Radiologists	Occupation	n ic Radiologist	
	Receipt For:		Year-to-Date ▼	+
	Primary General	riggrogate	real to Bate V	
	Other (specify) ▼		250.00	
			0 0 0 0 0 0 0	
3.	Full Name (Last, First, Middle Initial) DR Lorenz Ramseyer			Date of Receipt
	Mailing Address 11600 W Longhorn Trl			M M / D D / Y Y Y Y
	Troop W Longhom Th			01 10 2007
	City	State	Zip Code	Transaction ID: 18382173
	Drummond	OK	73735-1099	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		500.00
	·			
	Name of Employer Radiology Assoc. of Enid	Occupation		
			ic Radiologist	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General		500.00	
	Other (specify)	1 1		
	Full Name (Lost First Middle Initial)			
Э.	Full Name (Last, First, Middle Initial) DR Fredrick Mishkin			Date of Receipt
	Mailing Address 1 Flying Mane Rd			M M / D D / Y Y Y Y
				01 10 2007
	City	State	Zip Code	Transaction ID: 18382174
	Rolling Hills	CA	90274-5238	Amount of Each Receipt this Period
	FEC ID number of contributing			050.00
	federal political committee.	C		250.00
	Name of Frankria	0 1'	-	_
	Name of Employer Retired	Occupation		
	Daniel Fam		ic Radiologist	_
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	
	Other (specify)	' '	250.00	
	Carol (opcolly) 🔻		0 0 0 0 0 0 0	
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S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 18 / 128 (check only one)
ΙT	EMIZED RECEIPTS		or each category of the	
			Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
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	for commercial purposes, other than using the na			
\setminus	NAME OF COMMITTEE (In Full)			
$ \rangle$	American College of Radiology Associat	ion		
<u></u>	Full Name (Last, First, Middle Initial)			
A.	DR Gerald Smidebush			Date of Receipt
	Mailing Address 1500 Meadows Dr			M M / D D / Y Y Y Y
	Cit.	Otata	7:- Oada	01 10 2007
	City Lancaster	State OH	Zip Code	Transaction ID: 18382175
		ОП	43130-8000	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
				_
	Name of Employer Fairfield Imaging Associa-	Occupation		
	tes Receipt For:		ic Radiologist • Year-to-Date ▼	_
	Primary General	Aggregate	Flear-to-Date V	1
	Other (specify)		250.00	
_	Full Name (Last, First, Middle Initial)			Data of Bassist
В.	DR Richard Huss Mailing Address 4838 W Corsican Pine D	١,,		Date of Receipt
	4838 W Corsican Pine L)r		01 10 2007
	City	State	Zip Code	Transaction ID: 18382177
	Appleton	WI	54913-6509	Amount of Each Receipt this Period
	FEC ID number of contributing	С		250.00
	federal political committee.	C		200.00
	Name of Employer	Occupation	า	
	Radiology Associates of Appleton		ic Radiologist	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼	, ,	250.00	
	Other (specify)		0 0 0 0 0 0 0	1
_	Full Name (Last, First, Middle Initial)			
C.	DR Robert Rienzo			Date of Receipt
	Mailing Address Lehigh Valley Hospital 1200 S Cedar Crest Blvd	İ		01 10 2007
	City	State	Zip Code	Transaction ID: 18382179
	Allentown	PA	18103-6248	Amount of Each Receipt this Period
	FEC ID number of contributing			250.00
	federal political committee.	C		230.00
	Name of Employer	Occupation	า	
	Medical Imaging of Lehigh Valley		ic Radiologist	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General		250.00	1
	Other (specify) ▼		200.00	1
Г				
S	UBTOTAL of Receipts This Page (optional)			750.00

<u> </u>				FOR LINE NUMBER: PAGE 19 / 128
51	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	(check only one)
IT	EMIZED RECEIPTS		or each category of the	X 11a 11b 11c 12
			Detailed Summary Page	13 14 15 16 17
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or	for commercial purposes, other than using the r	name and add	dress of any political committee to	o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
$ \rangle$	American College of Radiology Associa	tion		
	American College of Hadiology Associa	шоп		
	Full Name (Last, First, Middle Initial)			
A.	DR Gerald Glassberg			Date of Receipt
	Mailing Address 1946 N 13th St Ste 483			M M / D D / Y Y Y Y
				01 10 2007
	City	State	Zip Code	Transaction ID: 18382180
	Toledo	OH	43624-1264	Amount of Each Receipt this Period
	FEC ID number of contributing			050.00
	federal political committee.	C		250.00
	Name of Employer Consuting Radiologists Co-	Occupation		
	rp.		ic Radiologist	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General		250.00	1
	Other (specify) ▼	0 0	200.00	1
R	Full Name (Last, First, Middle Initial) DR Louis Bujnoch			Date of Receipt
Ь.	· · · · · · · · · · · · · · · · · · ·			-
	Mailing Address 2320 Bolsover St			01 10 2007
	City	State	Zip Code	Transaction ID: 18382182
	Houston	TX	77005-2612	Amount of Each Receipt this Period
		1/	77003-2012	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	rederal political committee.			
	Name of Employer Rose Imaging Specialists	Occupation	ำ	\exists
	Rose Imaging Specialists	Diagnost	ic Radiologist	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General		050.00	1
	Other (specify) ▼		250.00	
_	Full Name (Last, First, Middle Initial)			
C.	DR Paul Wozney			Date of Receipt
	Mailing Address 4142 Mariner Blvd Apt 5	517		$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
	City	State	Zip Code	
	Spring Hill	FL	34609-2468	Transaction ID: 18382183
			34009-2400	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	rederal political committee.			
	Name of Employer	Occupation		\neg
	Self-employed	Diagnost	ic Radiologist	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General		050.00	7
	Other (specify) ▼		250.00	
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s	UBTOTAL of Receipts This Page (optional))	750.00
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C		ĺ		FOR LINE NUMBER: PAGE 20 / 128
3	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	(check only one)
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			Detailed Summary Page	13 14 15 16 17
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or	ny information copied from such Reports and State for commercial purposes, other than using the i	atements may name and add	not be sold or used by any personal dress of any political committee to	on for the purpose of soliciting contributions oscilicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full)			
	American College of Radiology Associa	ation		
Α.	Full Name (Last, First, Middle Initial) DR David Giles			Date of Receipt
	Mailing Address 3066 S Whitepost Way			01 10 2007
	City	State	Zip Code	Transaction ID: 18382184
	Eagle	ID	83616-6461	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer St Alphonsus Hospital		ic Radiologist	
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	
	Other (specify) ▼	0 0	1000.00	
_	Full Name (Last, First, Middle Initial)			
В.				Date of Receipt
	Mailing Address 530 Rolling Glen Drive			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 18382186
	Horsham	PA	19044-1169	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	0 0 0 0 0	365.00
		Ta		_
	Name of Employer Risole Imaging	Occupation Diagnost	n ic Radiologist	
	Receipt For:		e Year-to-Date ▼	7
	Primary General			7
	Other (specify) ▼		365.00	_
	Full Name (Last, First, Middle Initial) DR Robert Allen			Date of Receipt
	Mailing Address 4715 Willow St			M M / D D / Y Y Y Y Y O T O T O T O T O T O T O T O
	City	State	Zip Code	Transaction ID: 18382189
	Bellaire	TX	77401-4413	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer West Houston Radiology As- sociates		ic Radiologist	
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	-
	Other (specify)		500.00	
s	UBTOTAL of Receipts This Page (optional)			1865.00
\vdash			<u> </u>	-

0				FOR LINE NUMBER: PAGE 21 / 128
5	CHEDULE A (FEC Form 3X)	Use separate schedule(s) or each category of the		(check only one)
IT	EMIZED RECEIPTS			
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				13 14 15 16 17
Ar or	ny information copied from such Reports and St for commercial purposes, other than using the	atements may name and ado	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full)			
	American College of Radiology Associa	ation		
Α.	Full Name (Last, First, Middle Initial) DR Michael Rubin			Date of Receipt
	Mailing Address 339 W Streetsboro St			01 10 2007
	City	State	Zip Code	Transaction ID: 18382222
	Hudson	ОН	44236-2748	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		365.00
	Name of Employer Akron Children's Hospital		ic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 365.00]
В.	Full Name (Last, First, Middle Initial) DR Nicholas Spencer			Date of Receipt
	Mailing Address Saint Lukes Hospital 101 Page St			0 1 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 18382223
	New Bedford	MA	02740-3464	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer St Lukes Hospital	Occupation Diagnosti	n ic Radiologist	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		250.00	
<u> </u>	Full Name (Last, First, Middle Initial) DR William Sheils, JR			Date of Receipt
	Mailing Address 16 Seminole Rd			0 1 1 0 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 18382224
	Huntington	WV	25705-4124	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Radiology, Inc.	Occupation Diagnosti	n ic Radiologist	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		500.00	
s	UBTOTAL of Receipts This Page (optional)			1115.00

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 22 / 128			
	EMIZED RECEIPTS		or each category of the	(check only one)			
11	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12			
				13 14 15 16 17			
Ar or	ny information copied from such Reports and Sta for commercial purposes, other than using the n	tements may ame and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions a solicit contributions from such committee.			
\setminus	NAME OF COMMITTEE (In Full)						
	American College of Radiology Associate	tion					
Α.	Full Name (Last, First, Middle Initial) DR Scott Schultz			Date of Receipt			
	Mailing Address 5011 Schaefer Rd			$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$			
	City	State	Zip Code	Transaction ID: 18382227			
	Edina	MN	55436-1142	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		365.00			
	Name of Employer Minneapolis Radiology Ass- oc	Occupation Diagnost	n ic Radiologist				
	Receipt For:		e Year-to-Date ▼				
	Primary General		005.00	1			
	Other (specify)	0 0	365.00]			
В.	Full Name (Last, First, Middle Initial) DR James Junker			Date of Receipt			
	Mailing Address 16 Fox Meadows			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
	City	State	Zip Code	Transaction ID: 18382228			
	Saint Louis	MO	63127-1401	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		250.00			
	Name of Employer Scott Radiological Group,	Occupation	n	7			
	Scott Radiològićal Group, Inc.	Diagnost	ic Radiologist				
	Receipt For:	Aggregate	e Year-to-Date ▼	7			
	Primary General	1 1	050.00	1			
	Other (specify)	0 0	250.00				
<u>с.</u>	Full Name (Last, First, Middle Initial) DR Michael Milstein			Date of Receipt			
	Mailing Address 3335 Brookview Dr			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
	City	State	Zip Code	Transaction ID: 18382229			
	Eugene	OR	97401-1595	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		250.00			
	Name of Employer Oregon Medical Group	Occupation Diagnost	n ic Radiologist	7			
	Receipt For:		e Year-to-Date ▼	7			
	Primary General		050.00	1			
	Other (specify)	0 0	250.00				
	IIDTOTAL A Describe Title D			865.00			
L	UBTOTAL of Receipts This Page (optional)		······				

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 23 / 128
	EMIZED RECEIPTS	or each category of the		(check only one)
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				13 14 15 16 17
or	y information copied from such Reports and Si for commercial purposes, other than using the	name and add	r not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full)			
	American College of Radiology Associ	ation		
A.	Full Name (Last, First, Middle Initial) DR Jeffrey Zapolsky			Date of Receipt
	Mailing Address 1449 Knapp St			01 10 7 2007
	City	State	Zip Code	Transaction ID: 18382230
	Oshkosh	WI	54902-6353	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		365.00
	Name of Employer Radiology Associates of Fox Valley	Occupation Diagnost	n ic Radiologist	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		365.00	
— В.	Full Name (Last, First, Middle Initial) DR Noam Littman			Date of Receipt
	Mailing Address 2166 Moonlight Ct			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 18382231
	Menasha	<u>WI</u>	54952-8908	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Radiology Associates of Fox Valley	Occupation Diagnost	n ic Radiologist	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		250.00	
				_
<u> </u>	Full Name (Last, First, Middle Initial) DR Philip Trotta			Date of Receipt
C.				Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
C.	DR Philip Trotta Mailing Address 898 Durrow Dr City	State	Zip Code	M M / D D / Y Y Y Y
C.	DR Philip Trotta Mailing Address 898 Durrow Dr	State MO	Zip Code 63141-8835	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
C.	DR Philip Trotta Mailing Address 898 Durrow Dr City		·	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
C.	DR Philip Trotta Mailing Address 898 Durrow Dr City Saint Louis FEC ID number of contributing	MO C Occupation	63141-8835	Transaction ID: 18382233 Amount of Each Receipt this Period
c.	DR Philip Trotta Mailing Address 898 Durrow Dr City Saint Louis FEC ID number of contributing federal political committee. Name of Employer	MO C Occupation Diagnost	63141-8835 ic Radiologist Year-to-Date ▼	Transaction ID: 18382233 Amount of Each Receipt this Period
C.	DR Philip Trotta Mailing Address 898 Durrow Dr City Saint Louis FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For:	MO C Occupation Diagnost	63141-8835	Transaction ID: 18382233 Amount of Each Receipt this Period
	DR Philip Trotta Mailing Address 898 Durrow Dr City Saint Louis FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General	Occupation Diagnost Aggregate	63141-8835 ic Radiologist Year-to-Date ▼ 250.00	Transaction ID: 18382233 Amount of Each Receipt this Period

S	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 24 / 128
	· ·		Use separate schedule(s) or each category of the	(check only one)
Ш	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
				13 14 15 16 17
An	y information copied from such Reports and Sta	atements may	not be sold or used by any perso	on for the purpose of soliciting contributions
or	for commercial purposes, other than using the r	name and add	lress of any political committee to	solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
	American College of Radiology Associa	tion		
Α.	Full Name (Last, First, Middle Initial) DR Veronica Hingle			Date of Receipt
	Mailing Address PO Box 799			01 11 2007
	City	State	Zip Code	Transaction ID: 18384095
	Lewistown	MT	59457-0799	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Self-employed	Occupation Diagnosti	n ic Radiologist	
	Receipt For:		Year-to-Date ▼	_
	Primary General	00 0		1
	Other (specify) ▼	1	250.00	
В.	Full Name (Last, First, Middle Initial) DR David Donaldson			Date of Receipt
	Mailing Address 4808 105th St			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 18384096
	Lubbock	TX	79424-5762	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		500.00
	Name of Employer	Occupation	1	
	Lubbock Diagnostic Radiology, LLP	Diagnosti	ic Radiologist	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General		500.00	1
	Other (specify) ▼		500.00	
_	Full Name (Last, First, Middle Initial)			
C.	DR Christopher Reisenauer	7-1		Date of Receipt
	Mailing Address 3240 N Mountain View	∹d		01 11 2007
	City	State	Zip Code	Transaction ID: 18384097
	Moscow	ID	83843-8142	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Radiology Consultants	Occupation Diagnosti	n ic Radiologist	
	Receipt For:		Year-to-Date ▼	
	Primary General	33 -3-10		1
	Other (specify) ▼	1	250.00	
				1
	•			
s	UBTOTAL of Receipts This Page (optional)			1000.00
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S	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 25 / 128
	•		Use separate schedule(s) or each category of the	(check only one)
Ш	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
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Ar	ny information copied from such Reports and State for commercial purposes, other than using the	atements may	not be sold or used by any perso	on for the purpose of soliciting contributions
or	117	name and add	iress of any political committee to	solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
	American College of Radiology Associa	ation		
Α.	Full Name (Last, First, Middle Initial) DR Robert Gibbs			Date of Receipt
	Mailing Address 611 Quail Creek Rd			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 18384103
	Parsons	KS	67357-2257	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		1000.00
	Name of Employer Robert Charles Gibbs, M.D-	Occupation	n c Radiologist	
	., L.L.C. Receipt For:		Year-to-Date ▼	
	Primary General	00 0		1
	Other (specify) ▼	1	1000.00	
В.	Full Name (Last, First, Middle Initial) DR John Bools			Date of Receipt
	Mailing Address Catawba Radiological A	Assoc		M M / D D / Y Y Y Y
	18 13th Ave NE			01 11 2007
	City	State	Zip Code	Transaction ID: 18384105
	Hickory	NC	28601-3748	Amount of Each Receipt this Period
	FEC ID number of contributing	С	• • • • • •	365.00
	federal political committee.	<u> </u>		000.00
	Name of Employer	Occupation	1	
	Catawba Radiological Associates, Inc.	Diagnost	c Radiologist	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General	1 1	265.00	1
	Other (specify)	0 0	365.00	
_	Full Name (Last, First, Middle Initial)			
C.	DR Jeffrey Dunkle			Date of Receipt
	Mailing Address 6671 Boxcar PI			01 11 2007
	City	State	Zip Code	Transaction ID: 18384106
	Indianapolis	IN	46220-1786	Amount of Each Receipt this Period
	FEC ID number of contributing	С		365.00
	federal political committee.			
	Name of Employer Indiana Radiology Partner-	Occupation		
	s, Inc.		c Radiologist	_
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	,
	Other (specify)		365.00	
	Caron (Speedily) 🔻	0 0	0 0 0 0 0 0 0	1
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,	UBTOTAL of Receipts This Page (optional)			1730.00
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S	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 26 / 128
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Ш	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
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Ar	y information copied from such Reports and St	atements may	not be sold or used by any perso	on for the purpose of soliciting contributions
or	for commercial purposes, other than using the	name and add	dress of any political committee to	solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
	American College of Radiology Associa	ation		
Α.	Full Name (Last, First, Middle Initial) DR Julia Muskie			Date of Receipt
	Mailing Address 3909 Underwood St			01 11 2007
	City	State	Zip Code	Transaction ID: 18384109
	Chevy Chase	MD	20815-5029	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		365.00
	Name of Employer Drs. Groover, Christie and	Occupation	n ic Radiologist	
	Merritt Receipt For:		Year-to-Date ▼	\dashv
	Primary General	199.79		1
	Other (specify) ▼	l	365.00	
В.	Full Name (Last, First, Middle Initial) DR William Jackson			Date of Receipt
	Mailing Address 29 Sunset Blvd			M M / D D / Y Y Y Y
				01 11 2007
	City	State	Zip Code	Transaction ID: 18384110
	Beaufort	SC	29907-1465	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer	Occupation	า	_
	Beaufort Medical Imaging		ic Radiologist	
	Receipt For:		Year-to-Date ▼	
	Primary General	99 -9		1
	Other (specify) ▼		1000.00	
_	Full Name (Last, First, Middle Initial)			•
C.	DR Charles Kuntz			Date of Receipt
	Mailing Address 8275 Eagle Ridge Dr			01 11 7 2007
	City	State	Zip Code	Transaction ID: 18384111
	Cincinnati	OH	45243-1346	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Northeast Radiology, Inc.	Occupation	n ic Radiologist	
	Receipt For:		Year-to-Date V	\dashv
	Primary General	, 1991 09410		1
	Other (specify)		500.00	
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s	UBTOTAL of Receipts This Page (optional)			1865.00
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	EMIZED RECEIPTS		Use separate schedule(s) or each category of the	(check only one)
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or	y information copied from such Reports and St for commercial purposes, other than using the	atements may name and add	r not be sold or used by any personal ress of any political committee to	on for the purpose of soliciting contributions oscilcit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full)			
	American College of Radiology Associa	ation		
A.	Full Name (Last, First, Middle Initial) DR Eric Hyson			Date of Receipt
	Mailing Address 1067 Wolf Hill Rd			01 11 7 2007
	City	State	Zip Code	Transaction ID: 18384113
	Cheshire	CT	06410-1732	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		250.00
	Name of Employer Diagnostic Radiology Asso- ciates	Occupation Diagnost	n c Radiologist	7
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		250.00]
В.	Full Name (Last, First, Middle Initial) DR Daniel DiPrete			Date of Receipt
	Mailing Address 380 Ocean Rd			M M / D D / Y Y Y Y Y Y 1 Y 1 1 1 2 0 0 7
	City	State	Zip Code	Transaction ID: 18384117
	Narragansett	RI	02882-1390	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer The Imaging Institute	Occupation Diagnost	n c Radiologist	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	250.00	
		0 0	250.00	Date of Receipt
	Other (specify) Full Name (Last, First, Middle Initial) DR Erik Strom Mailing Address Selma Community Hos 1141 Rose Ave	•		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
C .	Other (specify) Full Name (Last, First, Middle Initial) DR Erik Strom Mailing Address Selma Community Hos 1141 Rose Ave City	State	Zip Code	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
C .	Other (specify) Full Name (Last, First, Middle Initial) DR Erik Strom Mailing Address Selma Community Hos 1141 Rose Ave	•		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
C .	Other (specify) Full Name (Last, First, Middle Initial) DR Erik Strom Mailing Address Selma Community Hos 1141 Rose Ave City	State	Zip Code	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
C.	Other (specify) Full Name (Last, First, Middle Initial) DR Erik Strom Mailing Address Selma Community Hos 1141 Rose Ave City Selma FEC ID number of contributing	State CA C	Zip Code 93662-3293	Transaction ID: 18384119 Amount of Each Receipt this Period
C.	Other (specify) Full Name (Last, First, Middle Initial) DR Erik Strom Mailing Address Selma Community Hos 1141 Rose Ave City Selma FEC ID number of contributing federal political committee. Name of Employer Self-Employed Receipt For:	State CA C Occupation Diagnost	Zip Code 93662-3293	Transaction ID: 18384119 Amount of Each Receipt this Period
C .	Other (specify) ▼ Full Name (Last, First, Middle Initial) DR Erik Strom Mailing Address Selma Community Hos 1141 Rose Ave City Selma FEC ID number of contributing federal political committee. Name of Employer Self-Employed	State CA C Occupation Diagnost	Zip Code 93662-3293	Transaction ID: 18384119 Amount of Each Receipt this Period
	Other (specify) Full Name (Last, First, Middle Initial) DR Erik Strom Mailing Address Selma Community Hos 1141 Rose Ave City Selma FEC ID number of contributing federal political committee. Name of Employer Self-Employed Receipt For: Primary General	State CA C Occupation Diagnost Aggregate	Zip Code 93662-3293 C Radiologist Year-to-Date ▼ 250.00	Transaction ID: 18384119 Amount of Each Receipt this Period

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 28 / 128
	EMIZED RECEIPTS		or each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12
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Ar or	ny information copied from such Reports and Stat for commercial purposes, other than using the na	tements may ame and add	y not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
\rangle	NAME OF COMMITTEE (In Full) American College of Radiology Associate	ion		
۹.	Full Name (Last, First, Middle Initial) DR Bonna Rogers-Neufeld			Date of Receipt
	Mailing Address 465 W Bluff Ave			0 1 1 2 0 0 7
	City	State	Zip Code	Transaction ID: 18384120
	Fresno	CA	93711-6900	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		365.00
	Name of Employer Sierra Imaging Associates	Occupation Diagnost	n ic Radiologist	
	Receipt For:		e Year-to-Date ▼	
	Primary General Other (specify) ▼		365.00	
3.	Full Name (Last, First, Middle Initial) DR Jeffrey Lund			Date of Receipt
	Mailing Address Mayo Clinic Scottsdale 13400 E Shea Blvd			01 11 2007
	City	State	Zip Code	Transaction ID: 18384122
	Scottsdale	AZ	85259-5499	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Mayo Clinic Scottsdale	Occupation		
	Receipt For:		ic Radiologist e Year-to-Date ▼	-
	Primary General	7.99.094.0		
	Other (specify) ▼	0 0	500.00	
Э.	Full Name (Last, First, Middle Initial) DR Joseph Accurso			Date of Receipt
	Mailing Address 2801 7th Ave SW			M M / D D / Y Y Y Y Y O D D / 2007
	City	State	Zip Code	Transaction ID: 18384123
	Austin	MN	55912-5522	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		500.00
	Name of Employer Austin Medical Center	Occupation Diagnost	n ic Radiologist	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		500.00	
s	UBTOTAL of Receipts This Page (optional)			1365.00
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- 1	OTAL This Period (last page this line number or	и у)		

S	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 29 / 128			
-			Use separate schedule(s) or each category of the	(check only one)			
11	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12			
			, ,	13 14 15 16 17			
An or	y information copied from such Reports and Stat for commercial purposes, other than using the na	tements may ame and add	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.			
$\overline{\ }$	NAME OF COMMITTEE (In Full)						
\rangle	American College of Radiology Associat	ion					
۹.	Full Name (Last, First, Middle Initial) DR Timothy Miller			Date of Receipt			
	Mailing Address Good Samaritan Hospita 375 Dixmyth Avenue	01 11 2007					
	City	State	Zip Code	Transaction ID: 18384124			
	Cincinnati	OH	45220-2489	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		300.00			
	Name of Employer MXI	Occupation Radiolog		7			
	Receipt For:		e Year-to-Date ▼				
	Primary General		200.00	1			
	Other (specify) ▼	0 0	300.00				
3.	Full Name (Last, First, Middle Initial) DR Thomas Dumler			Date of Receipt			
	Mailing Address 15910 Arkdale Ct			01 / 11 / 2007			
	City	State	Zip Code	Transaction ID: 18384127			
	<u>Spring</u>	TX	77379-6806	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С		250.00			
	Name of Employer Houston Radiology Associa-	Occupation					
	tes Receipt For:		ic Radiologist e Year-to-Date ▼				
	Primary General	Aggregate	r rear-to-date V	1			
	Other (specify) ▼	0 0	250.00				
) .	Full Name (Last, First, Middle Initial) DR Edward Hobart			Date of Receipt			
	Mailing Address 4509 Winged Foot Dr			01 / 11 / 2007			
	City	State	Zip Code	Transaction ID: 18384130			
	Hutchinson	KS	67502-8016	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		500.00			
	Name of Employer	Occupation	n				
	Radiology Professionals of Hutchinson		ic Radiologist				
	Receipt For:	Aggregate	e Year-to-Date ▼				
	Primary General	, ,	500.00				
	Other (specify) ▼	0 0					
S	SUBTOTAL of Receipts This Page (optional)						
9	UBTOTAL of Receipts This Page (optional)			1050.00			

S	CHEDULE A (FEC Form 3X)		Han annual order total ()	FOR LINE NUMBER: PAGE 30 / 128
ITEMIZED RECEIPTS			Use separate schedule(s) or each category of the	(check only one)
11	EMIZED RECEIP 15		Detailed Summary Page	X 11a 11b 11c 12
				13 14 15 16 17
An or	y information copied from such Reports and Stat for commercial purposes, other than using the na	tements may ame and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{}$	NAME OF COMMITTEE (In Full)			
\rangle	American College of Radiology Associat	ion		
۹.	Full Name (Last, First, Middle Initial) DR Laura Backer			Date of Receipt
	Mailing Address 2930 Squalicum Pkwy S	te 101		01 11 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 18384132
	Bellingham	WA	98225-1854	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer St Joseph Hospital	Occupation Diagnost	n ic Radiologist	
	Receipt For:	Aggregate	e Year-to-Date ▼	7
	Primary General		500.00	
	Other (specify)	0 0	300.00	
3.	Full Name (Last, First, Middle Initial) DR George Mulopulos			Date of Receipt
	Mailing Address 67 Princeville Ln	$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$		
	City	State	Zip Code	Transaction ID: 18384133
	<u>Las Vegas</u>	NV	89113-1369	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		250.00
	Name of Employer American Radiology Consul-	Occupation		
	tants		ic Radiologist	4
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	
	Other (specify)		250.00	
).	Full Name (Last, First, Middle Initial) DR S Steve Mera			Date of Receipt
	Mailing Address PO Box 7008			01 11 2007
	City	State	Zip Code	Transaction ID: 18384135
	Redlands	CA	92375-0008	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Citrus Valley Imaging	Occupation	n ic Radiologist	
	Receipt For:		e Year-to-Date ▼	_
	Primary General	35 0		1
	Other (specify) ▼	0 0	250.00	
s	UBTOTAL of Receipts This Page (optional)			1000.00
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S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER:	PAGE 31 / 128
ITEMIZED RECEIPTS			or each category of the	(check only one)	
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or	y information copied from such Reports and St for commercial purposes, other than using the	name and add	dress of any political committee to	solicit contributions from	such committee.
	NAME OF COMMITTEE (In Full)				
$ \rangle$	American College of Radiology Associa	ation			
\angle	3 3,				
	Full Name (Last, First, Middle Initial)				
Α.	DR Jeffrey Weinreb			Date of Receipt	
	Mailing Address 34 Randi Dr			0 1 1 1	
	City	State	Zip Code	Transaction ID: 18	
	Madison	CT	06443-2440	Amount of Each Re	
	FEC ID number of contributing			7	
	federal political committee.	C			500.00
	Name of Frankrik	10		_	
	Name of Employer Yale University School of	Occupation Radiolog			
	Medicine Receipt For:		e Year-to-Date ▼		
	Primary General	riggregate	Tour to Bute V	1	
	Other (specify) ▼		500.00		
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	Full Name (Last, First, Middle Initial)				
В.	DR William Landrum			Date of Receipt	
	Mailing Address Mountain Home Radiology Consul			0 1 1 1 1	2007
	PO Box 2008	State	Zip Code	Transaction ID: 18	
	Mountain Home	AR	72654-2008	Amount of Each Re	
			72034-2000	Amount of Each Ne	eceipi iriis Feriod
	FEC ID number of contributing federal political committee.	C			500.00
	Name of Employer Mountain Home Radiology	Occupation			
	Consultants		ic Radiologist		
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼		
	Other (specify)		500.00		
	care (epoch)/ •	-		1	
_	Full Name (Last, First, Middle Initial)				
C.	DR Constance Maves			Date of Receipt	
	Mailing Address 3100 Carrigan Canyon	Dr		0 1 1 1 1	2007
	City	State	Zip Code	Transaction ID: 18	
	Salt Lake City	UT	84109-1476	Amount of Each Re	
	FEC ID number of contributing		01100 1170	Amount of Each Fig	· · · · · ·
	federal political committee.	C			250.00
	N (5)	10		_	
	Name of Employer Pediatric Radiology, P.C.	Occupation			
	Receipt For:		ic Radiologist Year-to-Date ▼	_	
	Primary General	Aggregate	Flear-to-Date V	1	
	Other (specify)		250.00		
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s	UBTOTAL of Receipts This Page (optional)		1250.00		
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S	CHEDULE A (FEC Form 3X)		Harris and a sale and date (a)	FOR LINE NUMBER: PAGE 32 / 128
ITEMIZED RECEIPTS			Use separate schedule(s) or each category of the	(check only one)
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Ar	y information copied from such Reports and Sta for commercial purposes, other than using the r	itements may	not be sold or used by any person	on for the purpose of soliciting contributions
<u></u>	NAME OF COMMITTEE (In Full)			
$ \rangle$	American College of Radiology Associa	tion		
	7 mondan conogo or riddiology 7 docoda			
_	Full Name (Last, First, Middle Initial)			
Α.	DR Charles Hecht-Leavitt			Date of Receipt
	Mailing Address MRI & CT Diagnostics 4668 Pembroke Blvd St	o 100		01 11 2007
	City	State	Zip Code	Transaction ID: 18384300
	Virginia Beach	VA	23455-6423	Amount of Each Receipt this Period
	FEC ID number of contributing		20.0000.20	
	federal political committee.	C		1000.00
	Name of Francisco	10		
	Name of Employer Charles Hecht-Leavitt, M	Occupation	ic Radiologist	
	D., P.C. Receipt For:		Year-to-Date V	+
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	Other (specify) ▼	1	1000.00	
	Full Name (Last, First, Middle Initial)			5. (5
В.				Date of Receipt
	Mailing Address Richmond Radiologist 35 S 8th St			01 11 2007
	City	State	Zip Code	Transaction ID: 18384301
	Richmond	IN	47374-5441	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		500.00
	Name of Employer	Occupation	<u> </u>	\dashv
	Richmond Radiology		ic Radiologist	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General		500.00	1
	Other (specify)		500.00	
_	Full Name (Last First Middle Initial)			
C.	Full Name (Last, First, Middle Initial) DR Mark Freeman			Date of Receipt
	Mailing Address 640 Hill Road			M M / D D / Y Y Y
	-			01 11 2007
	City	State	Zip Code	Transaction ID: 18384302
	Brentwood	TN	37027-4438	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	rederal political committee.			
	Name of Employer Radiology Alliance, PC	Occupation		
			ic Radiologist	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify)		250.00	
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$\overline{}$	NAME OF COMMITTEE (In Full)			
\geq	American College of Radiology Associati	on		
۹.	Full Name (Last, First, Middle Initial) DR Timothy E. Moore			Date of Receipt
	Mailing Address Univ of Nebraska Medical Ctr 981045 Nebraska Medical Ctr			01 11 2007
	City	State	Zip Code	Transaction ID: 18384738
	<u>Omaha</u>	NE	68198-1045	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		250.00
	Name of Employer Univ of Nebraska Medical Ctr	Occupation Diagnost	n ic Radiologist	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		250.00	
3.	Full Name (Last, First, Middle Initial) DR Robert Brown			Date of Receipt
	Mailing Address 2405 Brentwood Dr			01 11 2007
	City	State	Zip Code	Transaction ID: 18384739
	Houston	TX	77019-3307	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Southwest Radiology	Occupation		
	Receipt For:		ic Radiologist e Year-to-Date ▼	-
	Primary General	riggrogate		1
	Other (specify) ▼	0 0	500.00	
Э.	Full Name (Last, First, Middle Initial) DR Peter Dempsey			Date of Receipt
	Mailing Address MD Anderson Cancer Cti PO Box 301439	•		01 11 / 2007
	City	State	Zip Code	Transaction ID: 18384740
	Houston	TX	77230-1439	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer MD Anderson Cancer Ctr	Occupation Diagnost	ⁿ ic Radiologist	
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	1
	Other (specify) ▼		500.00	
SI	JBTOTAL of Receipts This Page (optional)			1250.00
т	OTAL This Period (last page this line number on	lv)		

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	NAME OF COMMITTEE (In Full)			
\rangle	American College of Radiology Associa	ation		
Α.	Full Name (Last, First, Middle Initial) DR Paul Dybbro			Date of Receipt
	Mailing Address 815 Walnut Ave			01
	City	State	Zip Code	Transaction ID: 18384741
	Burlingame	CA	94010-5009	Amount of Each Receipt this Period
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	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Kaiser Permanente	Occupation Diagnosti	n ic Radiologist	
	Receipt For:		Year-to-Date ▼	
	Primary General	00 0		7
	Other (specify) ▼		250.00	
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— В.	Full Name (Last, First, Middle Initial) DR Edgar Ferguson			Date of Receipt
	Mailing Address 200 S Rhodes St	M M / D D / Y Y Y Y		
		01 11 2007		
	City	Transaction ID: 18384745		
	West Memphis	AR	72301-4212	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		250.00
	Name of Employer Outpatient Radiology	Occupation		
	- Cutpation Hadiology		ic Radiologist	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General		250.00	1
	Other (specify)	0 0	250.00	
	Full Name (Last, First, Middle Initial)			
C.	DR Laura Knight			Date of Receipt
	Mailing Address 526 N Tara Ln			01 11 7 2007
	City	State	Zip Code	Transaction ID: 18384752
	Wichita	KS	67206-1828	Amount of Each Receipt this Period
	FEC ID number of contributing			250.00
	federal political committee.	C		250.00
	Name of Employer Special Radiology Services	Occupation		
		Diagnosti	ic Radiologist	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General		252.25	1
	Other (specify) ▼		250.00	
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An or	y information copied from such Reports and Stat for commercial purposes, other than using the na	tements may	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions
$\overline{\ \ }$	NAME OF COMMITTEE (In Full)			
\rangle	American College of Radiology Associat	ion		
۹.	Full Name (Last, First, Middle Initial) DR William Shuman			Date of Receipt
	Mailing Address 13325 164th Ave NE			01 11 2007
	City	State	Zip Code	Transaction ID: 18384754
	Redmond	WA	98052-1717	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Evergreen Hospital Medical Ctr	Occupation Diagnost	ⁿ ic Radiologist	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		250.00	
3.	Full Name (Last, First, Middle Initial) DR J Daniel Hanks, JR			Date of Receipt
	Mailing Address Rome Radiology Group 1104 Martha Berry Blvd	01 / 11 / 2007		
	City	State	Zip Code	Transaction ID: 18384762
	Rome	GA	30165-1694	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer Rome Radiology Group, PA		ic Radiologist	
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	
	Other (specify)		1000.00	
) .	Full Name (Last, First, Middle Initial) DR Ronald Weis			Date of Receipt
	Mailing Address 11720 High Dr			01 / 11 / 2007
	City	State	Zip Code	Transaction ID: 18384763
	Leawood	KS	66211-2226	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer Alliance Radiology PA	Occupation Diagnost	n ic Radiologist	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		1000.00	
s	UBTOTAL of Receipts This Page (optional)			2250.00
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	NAME OF COMMITTEE (In Full)			
\rangle	American College of Radiology Associa	ation		
Α.	Full Name (Last, First, Middle Initial) DR Kelly McDonough			Date of Receipt
	Mailing Address 3604 Hunters Creek Ro	t		0 1 1 1 2 0 0 7
	City	State	Zip Code	Transaction ID: 18384764
	Edmond	OK	73003-3568	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		365.00
	Name of Employer Kelly McDonough, M.D., P C.		ic Radiologist	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General		365.00	1
	Other (specify)			
— В.	Full Name (Last, First, Middle Initial) DR Gordon McLean			Date of Receipt
٥.	Mailing Address The Western Pennsylva	ania Hosp		M M / D D / Y Y Y Y
	4800 Friendship Ave	01 11 2007		
	City	State	Zip Code	Transaction ID: 18384765
	Pittsburgh	PA	15224-1793	Amount of Each Receipt this Period
	FEC ID number of contributing			050.00
	federal political committee.	C		250.00
	Name of Employer The Western Pennsylvania	Occupation	n	-
	The Western Pennsylvania		ic Radiologist	
	Receipt For:	Aggregate	e Year-to-Date ▼	7
	Primary General		050.00	1
	Other (specify) ▼		250.00	
<u> </u>	Full Name (Last, First, Middle Initial) DR Venkata Devineni			Date of Receipt
٥.	Mailing Address De Paul Cancer Care			M M / D D / Y Y Y Y
	12303 De Paul Dr			01 11 2007
	City	State	Zip Code	Transaction ID: 18384771
	St Louis	MO	63044-2588	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer Self-Employed	Occupation Radiation	n n Oncologist	
	Receipt For:		e Year-to-Date ▼	7
	Primary General			1
	Other (specify) ▼		1000.00	
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S	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 37 / 128
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or	for commercial purposes, other than using the	name and add	dress of any political committee to	solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full)			
$ \rangle$	American College of Radiology Associa	ition		
_	Full Name (Last, First, Middle Initial)			
A.	DR Gregory Weaver			Date of Receipt
	Mailing Address 210 25th Ave N Ste 602	2		0 1 1 1 2 0 0 7
	City	State	Zip Code	Transaction ID: 18384772
	Nashville	TN	37203-1631	Amount of Each Receipt this Period
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	FEC ID number of contributing federal political committee.	C		365.00
	Name of Employer Radiology Alliance	Occupation		7
			ic Radiologist	
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	Other (specify)	' '	365.00	
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В.	Full Name (Last, First, Middle Initial) DR Jay Salwen			Date of Receipt
	Mailing Address 214 Forts Ferry Road			M M / D D / Y Y Y Y
				01 11 2007
	City	State	Zip Code	Transaction ID: 18384780
	Latham	NY	12110-1209	Amount of Each Receipt this Period
	FEC ID number of contributing	С		250.00
	federal political committee.			230.00
	Name of Employer	Occupation	1	7
	Self-Employed	Diagnost	ic Radiologist	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General	1 1	250.00	1
	Other (specify)	0 0	250.00	
_	Full Name (Last, First, Middle Initial)			
C.	DR Steven Gross Mailing Address 2060 W Broad St			Date of Receipt
	Walling Address 2060 W Broad St			01 11 2007
	City	State	Zip Code	Transaction ID: 18384782
	Scotch Plains	NJ	07076-4755	Amount of Each Receipt this Period
	FEC ID number of contributing			250.00
	federal political committee.	С		250.00
	Name of Employer Self-Employed	Occupation		
			ic Radiologist	_
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General	1	250.00	
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	for commercial purposes, other than using the na			
\setminus	NAME OF COMMITTEE (In Full)			
	American College of Radiology Associat	ion		_
Α.	Full Name (Last, First, Middle Initial) DR Sadashiv Shenoy			Date of Receipt
	Mailing Address 4488 E Overlook Dr			01 11 2007
	City	State	Zip Code	Transaction ID: 18384784
	Williamsville	NY	14221-6310	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Millard Fillmore Hospital	Occupation Diagnost	n ic Radiologist	
	Receipt For:		e Year-to-Date ▼	7
	Primary General		500.00	1
	Other (specify)		500.00	
— В.	Full Name (Last, First, Middle Initial) DR Tony Deeths			Date of Receipt
	Mailing Address 7701 Calle Cerca			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 18384801
	Bakersfield	CA	93309-7134	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Self-employed	Occupation		7
			ic Radiologist	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify)	' '	250.00	
	Cities (specify)			
<u>с.</u>	Full Name (Last, First, Middle Initial) DR Shaun McManimon			Date of Receipt
	Mailing Address Radiology LTD 677 N Wilmot Rd			0 1 1 1 2 0 0 7
	City	State	Zip Code	Transaction ID: 18384802
	Tucson	AZ	85711-2701	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Radiology LTD	Occupation	n ic Radiologist	
	Receipt For:		e Year-to-Date ▼	-
	Primary General			1
	Other (specify) ▼		500.00	
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SCHEDULE A (FEC Form 3X)			Llea coparata cabadula(c)	FOR LINE NUMBER: PAGE 39 / 128
	ITEMIZED RECEIPTS		Use separate schedule(s) or each category of the	(check only one)
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	NAME OF COMMITTEE (In Full)			
	American College of Radiology Associa	ation		
Α.	Full Name (Last, First, Middle Initial) DR Steven Strober			Date of Receipt
	Mailing Address 7500 N Avenida de Lisa	l		01 11 7 2007
	City	State	Zip Code	Transaction ID: 18384803
	Tucson	AZ	85704-7047	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Radiology Ltd	Occupation	n ic Radiologist	
	Receipt For:		Year-to-Date ▼	
	Primary General		500.00	1
	Other (specify)	0 0	300.00	
В.	Full Name (Last, First, Middle Initial) DR Edward Woolsey			Date of Receipt
	Mailing Address 3770 E Sumo Octavo			01 11 2007
	City	State	Zip Code	Transaction ID: 18384804
	Tucson	AZ	85718-6042	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Radiology LTD	Occupation Diagnosti	n ic Radiologist	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General		500.00	1
	Other (specify)	0 0	300.00	
C.	Full Name (Last, First, Middle Initial) DR Julie Zaetta			Date of Receipt
	Mailing Address Radiology Ltd 677 N Wilmot Rd			01 11 2007
	City	State	Zip Code	Transaction ID: 18384807
	Tucson	AZ	85711-2701	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Radiology Ltd	Occupation Diagnosti	n ic Radiologist	
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	Other (specify) ▼		500.00	
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NAME OF COMMITTEE (In Full)			
American College of Radiology Associa	ition		
Full Name (Last, First, Middle Initial) A. DR Donald Roach			Date of Receipt
Mailing Address 10978 N Poinsettia Dr			01 11 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 18384808
Tucson	AZ	85737-6507	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		500.00
Name of Employer Radiology LTD	Occupatio Diagnost	n ic Radiologist	
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General		500.00	1
Other (specify) ▼		300.00	
Full Name (Last, First, Middle Initial) DR Andrew Royster			Date of Receipt
Mailing Address Radiology Ltd 677 N Wilmot Rd			01 11 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 18384809
Tucson	AZ	85711-2701	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		500.00
Name of Employer Radiology Ltd	Occupatio Diagnost	n ic Radiologist	
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General		500.00	1
☐ Other (specify) ▼		000.00	
Full Name (Last, First, Middle Initial) DR Steven Siwik			Date of Receipt
Mailing Address Radiology Ltd 677 N Wilmot Rd		71.0	01 11 2007
City	State	Zip Code	Transaction ID: 18384810
Tucson	AZ	85711-2701	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer Radiology, LTD	Occupatio		7
		ic Radiologist	
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼	_ ' '	500.00	
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SUBTOTAL of Receipts This Page (optional)			1500.00
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SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 41 / 12	8		
	ITEMIZED RECEIPTS		or each category of the	(check only one)		
••			Detailed Summary Page	X 11a 11b 11c 12	□ 17	
Ar	ny information copied from such Reports and St	atements may	y not be sold or used by any perso	on for the purpose of soliciting contributions		
or	for commercial purposes, other than using the	name and add	dress of any political committee to	solicit contributions from such committee.		
	NAME OF COMMITTEE (In Full)					
	American College of Radiology Associa	ation				
Α.	Full Name (Last, First, Middle Initial) DR Daniel Stricof			Date of Receipt		
Α.	Mailing Address 3512 East Windy Point	Drive		M M / D D / Y Y Y	Y	
				01 11 2007		
	City	State	Zip Code	Transaction ID: 18384811		
	Tucson	AZ	85718-1430	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		500.00)	
	Name of Employer Radiology Ltd	Occupation	n ic Radiologist	7		
	Receipt For:		e Year-to-Date ▼			
	Primary General		500.00	1		
	Other (specify) ▼	0 0	300.00			
В.	Full Name (Last, First, Middle Initial) DR Anthony Lomonaco			Date of Receipt		
	Mailing Address 3931 E Coronado Dr			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	City State		Zip Code	Transaction ID: 18384813	Transaction ID: 18384813	
	Tucson	AZ	85718-1511	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		500.00)	
	Name of Employer Radiology Ltd	Occupation				
	·	<u> </u>	ic Radiologist			
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼			
	Other (specify) ▼		500.00			
_	Full Name (Last, First, Middle Initial) DR Wendy McCurdy			Date of Receipt		
Ο.	Mailing Address 5542 N Paseo Pescado	1		M M / D D / Y Y Y	Y	
		,		01 11 2007		
	City	State	Zip Code	Transaction ID: 18384814		
	Tucson	AZ	85718-5126	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		500.00)	
	Name of Employer Radiology Ltd	Occupation	n ic Radiologist			
		e Year-to-Date ▼				
	Primary General	-	500.00			
	Other (specify) ▼		500.00			
s	UBTOTAL of Receipts This Page (optional))	1500.00)	
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S	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 42 / 128
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or	for commercial purposes, other than using the n	ame and add	lress of any political committee to	solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full)			
	American College of Radiology Associa	tion		
Α.	Full Name (Last, First, Middle Initial) DR Mark Peterson			Date of Receipt
	Mailing Address 6100 N Canon del Pajar	0		0 1
	City	State	Zip Code	Transaction ID: 18384815
	Tucson	AZ	85750-1362	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Radiology Ltd	Occupation Diagnosti	n ic Radiologist	
	Receipt For:		Year-to-Date ▼	
	Primary General	00 0		1
	Other (specify) ▼	l	500.00	
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В.	Full Name (Last, First, Middle Initial) DR Robert Rauch, II			Date of Receipt
	Mailing Address 6110 N Paseo Zaldivar			M M / D D / Y Y Y Y
				01 11 2007
	City	State	Zip Code	Transaction ID: 18384816
	Tucson	AZ	85750-1294	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer	Occupation	า	7
	Radiology Ltd		ic Radiologist	
	Receipt For:	<u> </u>	Year-to-Date ▼	
	Primary General			1
	Other (specify) ▼		500.00	
	Full Name (Last, First, Middle Initial)			1
C.	DR Christos Karabinas			Date of Receipt
	Mailing Address 4521 E Swans Nest Rd			01 11 7 2007
	City	State	Zip Code	Transaction ID: 18384817
	Tucson	AZ	85718-6247	Amount of Each Receipt this Period
	FEC ID number of contributing	С		250.00
	federal political committee.			
	Name of Employer Radiology LTD	Occupation		
			ic Radiologist	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General		250.00	
	Other (specify)			1
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SCHEDULE A (FEC Form 3X)		Use separate schedule(s)		(check only one)
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			Detailed Summary Page	13 14 15 16 17
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or	for commercial purposes, other than using the r	name and add	dress of any political committee to	o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
$ \rangle$	American College of Radiology Associa	tion		
	American College of Hadiology Associa	шоп		
<u>/</u>	Full Name (Last, First, Middle Initial)			
A.	DR Lawrence Kaskowitz			Date of Receipt
	Mailing Address Radiology Ltd			M M / D D / Y Y Y Y
	677 N Wilmot Rd			01 11 2007
	City	State	Zip Code	Transaction ID: 18384820
	Tucson	AZ	85711-2701	Amount of Each Receipt this Period
	FEC ID number of contributing			500.00
	federal political committee.	C		500.00
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	Name of Employer Radiology, LTD	Occupation		
			ic Radiologist	_
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General		500.00	11
	Other (specify)	1 1		1
R	Full Name (Last, First, Middle Initial) DR N Judge King, III			Date of Receipt
υ.	Mailing Address 6370 E Miramist PI			M M / D D / Y Y Y Y
	Walling Address 6570 E Willallist FI	01 11 2007		
	City	State	Zip Code	Transaction ID: 18384821
	Tucson	AZ	85750-1314	Amount of Each Receipt this Period
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	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Radiology Ltd	Occupation	1	
	naulology Ltd		ic Radiologist	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General	1 1	500.00	7
	Other (specify)		300.00]
_	Full Name (Last, First, Middle Initial) DR Jae Kim			Date of Receipt
Ċ.		015		M M / D D / Y Y Y Y
	Mailing Address 4729 E Sunrise Dr Apt 3	010		01 11 2007
	City	State	Zip Code	Transaction ID: 18384822
	Tucson	AZ	85718-4534	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		500.00
	Name of Employer Radiology Ltd	Occupation		
			ic Radiologist	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General	1 1	500.00	11
	Other (specify)		300.00	1
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				1500.00
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SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER	PAGE 44 / 128	
ITEMIZED RECEIPTS			or each category of the	(check only one)	
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				13 14	15 16 17
Ar	y information copied from such Reports and St for commercial purposes, other than using the	atements may name and add	/ not be sold or used by any perso dress of any political committee to	on for the purpose of solid solicit contributions from	citing contributions
<u></u>	NAME OF COMMITTEE (In Full)		are or any point our committee to		
$ \rangle$	American College of Radiology Associa	ation			
	American conege of Hadiology Associa	ation			
_	Full Name (Last, First, Middle Initial)				
Α.	DR David Emmerson			Date of Receipt	
	Mailing Address 5972 N Coatimundi Dr			0 1 1 1	2007
	City	State	Zip Code		
	Tucson	AZ	85750-0906	Transaction ID: 1 Amount of Each R	
		\rac{\rac{\rackler}{\rackler}}{\rackler}	83730-0900	Amount of Each H	eceipi triis Period
	FEC ID number of contributing federal political committee.	C			500.00
	Name of Employer Radiology LTD	Occupation			
			ic Radiologist		
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	.	
	Primary General Other (specify) ▼		500.00		
	Other (specify)	-	0 0 0 0 0 0 0	J.	
	Full Name (Last, First, Middle Initial)				
В.	DR Andrew Gyorke			Date of Receipt	
	Mailing Address Radiology LTD				/ Y Y Y Y
	677 N Wilmot Rd			01 1	
	City	State	Zip Code	Transaction ID: 1	
	Tucson	AZ	85711-2701	Amount of Each R	eceipt this Period
	FEC ID number of contributing	С			500.00
	federal political committee.				
	Name of Employer Radiology LTD	Occupation	n		
	Radiology LTD	Diagnost	ic Radiologist		
	Receipt For:	Aggregate	e Year-to-Date ▼		
	Primary General		500.00		
	Other (specify)				
_	Full Name (Last, First, Middle Initial)				
C.	DR Lindsey Inouye			Date of Receipt	
	Mailing Address 5216 N Camino Escuel	a		M M / D D	/ Y Y Y Y
				0 1 1	
	City	State	Zip Code	Transaction ID: 1	8384828
	Tucson	AZ	85718-5017	Amount of Each R	eceipt this Period
	FEC ID number of contributing	С			500.00
	federal political committee.				
	Name of Employer	Occupation	n		
Radiology Ltd		Diagnost	ic Radiologist		
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Primary General			500.00	1	
Other (specify) ▼			300.00		
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SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER:	PAGE 45 / 128
IT	ITEMIZED RECEIPTS		or each category of the	(check only one)	144. 🗆 40
•			Detailed Summary Page	X 11a 11b 13 14	11c 12 15 16 17
Ar	ny information copied from such Reports and Sta	tements may	not be sold or used by any perso	on for the purpose of solicit	ting contributions
or	for commercial purposes, other than using the na	ame and add	dress of any political committee to	solicit contributions from	such committee.
Λ	NAME OF COMMITTEE (In Full)				
	American College of Radiology Associat	ion			
Α.	Full Name (Last, First, Middle Initial) DR David Jeck			Date of Receipt	
Α.	Mailing Address Radiology Ltd			M M / D D	/ Y Y Y Y Y
	677 N Wilmot Rd			01 11	2007
	City	State	Zip Code	Transaction ID: 18	
	Tucson	AZ	85711-2701	Amount of Each Re	ceipt this Period
	FEC ID number of contributing federal political committee.	C			500.00
	Name of Employer Radiology Ltd	Occupation Diagnost	n ic Radiologist		
	Receipt For:		e Year-to-Date ▼		
	Primary General		500.00	1	
	Other (specify)	0 0	300.00	1	
В.	Full Name (Last, First, Middle Initial) DR Bradley Bohnert			Date of Receipt	
	Mailing Address Radiology Ltd 677 N Wilmot Rd			0 1 / D D D 1 1 1	2007
	City	State	Zip Code	Transaction ID: 18	384830
	Tucson	AZ	85711-2701	Amount of Each Re	ceipt this Period
	FEC ID number of contributing federal political committee.	C			500.00
	Name of Employer Radiology Ltd	Occupation			
			ic Radiologist		
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	1	
	Other (specify) ▼	0 0	500.00		
_	Full Name (Last, First, Middle Initial)			Data of Bassint	
C.	DR Richard Boyle, JR Mailing Address 5660 N Calle Mayapan			Date of Receipt	/ Y Y Y Y Y
				01 11	2007
	City	State	Zip Code	Transaction ID: 18	384831
	Tucson	AZ	85718-5135	Amount of Each Re	ceipt this Period
	FEC ID number of contributing federal political committee.	C			500.00
	Name of Employer Radiology LTD	Occupation Diagnost	n ic Radiologist		
			e Year-to-Date ▼		
	Primary General		500.00	1	
	Other (specify)	0 0	300.00	1	
s	UBTOTAL of Receipts This Page (optional)				1500.00
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SCHEDULE A (FEC Form 3X)		Harana and a data data (a)		FOR LINE NUMBER: PAGE 46 / 128
	EMIZED RECEIPTS		Use separate schedule(s) or each category of the	(check only one)
•	EIMIZED RECEIP 13		Detailed Summary Page	X 11a 11b 11c 12
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or	y information copied from such Reports and Stat for commercial purposes, other than using the na	ame and add	dress of any political committee to	solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)	•		
\angle	American College of Radiology Associat	ion		
A.	Full Name (Last, First, Middle Initial) DR Kim Burroughs			Date of Receipt
	Mailing Address 4411 N Camino Sumo			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 18384832
	Tucson	ΑZ	85718-7473	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Radiology LTD	Occupatio Diagnost	n ic Radiologist	1
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General	1	500.00	1
	Other (specify) ▼			1
В.	Full Name (Last, First, Middle Initial) DR Taylor Chen			Date of Receipt
	Mailing Address Radiology Ltd 677 N Wilmot Rd			0 1 1 1 2 0 0 7
	City	State	Zip Code	Transaction ID: 18384835
	Tucson	AZ	85711-2701	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Radiology Ltd	Occupatio Diagnost	n ic Radiologist	7
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General		500.00	1
	Other (specify)		300.00	J.
<u> </u>	Full Name (Last, First, Middle Initial) DR Daniel Anavy			Date of Receipt
	Mailing Address 6658 N Avenida De Las	Palazas		M M / D D / Y Y Y Y Y O D D / 2007
	City	State	Zip Code	Transaction ID: 18384836
	Tucson	AZ	85750-1287	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Radiology LTD	Occupatio	n ic Radiologist	7
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	Primary General	99. 09410		1
	Other (specify)		500.00	
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SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 47 / 128
	EMIZED RECEIPTS		or each category of the	(check only one)
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\setminus	NAME OF COMMITTEE (In Full)			
\rangle	American College of Radiology Associate	tion		
Α.	Full Name (Last, First, Middle Initial) DR Boyd Ashdown			Date of Receipt
	Mailing Address 6021 N Desert Moon Ct			01 11 2007
	City	State	Zip Code	Transaction ID: 18384837
	Tucson	AZ	85750-0924	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Radiology LTD	Occupation	n ic Radiologist	
	Receipt For:		e Year-to-Date ▼	7
	Primary General		500,00	1
	Other (specify)	0 0	500.00	
В.	Full Name (Last, First, Middle Initial) DR Michael Baker			Date of Receipt
	Mailing Address 6541 N Placita Alta Repo	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	City	State	Zip Code	Transaction ID: 18384838
	Tucson	AZ	85750-4204	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Radiology Ltd	Occupation	n	_
	nadiology Ltd	<u> </u>	ic Radiologist	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		500.00]
<u> </u>	Full Name (Last, First, Middle Initial) DR Jennifer Bogan			Date of Receipt
	Mailing Address Radiology Ltd 677 N Wilmot Rd			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 18384839
	Tucson	AZ	85711-2701	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Radiology, Ltd	Occupation Diagnost	n ic Radiologist	
	Receipt For:		e Year-to-Date ▼	7
	Primary General	-	500.00	1
	Other (specify) ▼		500.00	
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51	CHEDULE A (FEC Form 3X)	Use separate schedule(s)		(check only one)
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Δr	y information copied from such Reports and St	atements may	y not he sold or used by any ners	
or	for commercial purposes, other than using the	name and add	dress of any political committee to	solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
$ \rangle$	American College of Radiology Associa	ation		
	American College of Hadiology Associa	ation		
	Full Name (Last, First, Middle Initial)			
A.	DR Robert Pakter			Date of Receipt
	Mailing Address Radiology Ltd			M M / D D / Y Y Y Y
	677 N Wilmot Rd			01 11 2007
	City	State	Zip Code	Transaction ID: 18384846
	Tucson	AZ	85711-2701	Amount of Each Receipt this Period
	FEC ID number of contributing			500.00
	federal political committee.	C		500.00
	Name of Employer Radiology Ltd	Occupation		
			ic Radiologist	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General		500.00	1
	Other (specify)		300.00	
ь	Full Name (Last, First, Middle Initial)			Date of Bassint
В.				Date of Receipt
	Mailing Address Casper Medical Imagin 419 S Washington St	g		01 11 2007
	City	State	Zip Code	
	Casper	WY	82601-2991	Transaction ID: 18384855
		VVI	82601-2991	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		300.00
	rederal political committee.			
	Name of Employer	Occupation	า	\neg
	Casper Medical Imaging	Diagnost	ic Radiologist	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General	1 1		7
	Other (specify)	1	300.00	
	Full Name (Last, First, Middle Initial)			
C.	DR Glenn Hananouchi			Date of Receipt
	Mailing Address 1545 E La Quinta Dr			0 1 1 1 2 0 0 7
	Oit.	Ctata	7:- Onda	
	City	State	Zip Code	Transaction ID: 18385079
	Fresno	CA	93720-4525	Amount of Each Receipt this Period
	FEC ID number of contributing	С		250.00
	federal political committee.			
	Name of Employer	Occupation	า	\neg
	Sierra Imaging Associates		ic Radiologist	
	Receipt For:		Year-to-Date ▼	\dashv
	Primary General	33 -3		7
	Other (specify) ▼		250.00	
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SCHEDULE A (FEC Form 3X)		Use separate schedule(s)		FOR LINE NUMBER: PAGE 49 / 128
	EMIZED RECEIPTS		or each category of the	(check only one)
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Ar or	ny information copied from such Reports and Stat for commercial purposes, other than using the na	tements may ame and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full)			
\rangle	American College of Radiology Associat	ion		
Α.	Full Name (Last, First, Middle Initial) DR Marc Siegel			Date of Receipt
	Mailing Address 701 Club Ridge Ct			01 11 2007
	City	State	Zip Code	Transaction ID: 18385080
	Longwood	FL	32779-2222	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Waterman Medical Center	Occupation Diagnost	n ic Radiologist	
	Receipt For:	Aggregate	e Year-to-Date ▼	7
	Primary General			1
	Other (specify) ▼	0 0	250.00	
В.	Full Name (Last, First, Middle Initial) DR David Rodibaugh			Date of Receipt
	Mailing Address 1 Saint Raphael	0 1		
	City	State	Zip Code	Transaction ID: 18385083
	Laguna Niguel	CA	92677-2761	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Self-employed	Occupation	n	┥
	Self-employed 1	Diagnost	ic Radiologist	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General			1
	Other (specify) ▼		250.00	
<u>с</u> .	Full Name (Last, First, Middle Initial) DR Jerome Barakos			Date of Receipt
	Mailing Address California Pacific Med Co 2333 Buchanan St	enter		0 1
	City	State	Zip Code	Transaction ID: 18385199
	San Francisco	CA	94115-1995	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer California Pacific Med Ce- nter	Occupation Diagnost	n ic Radiologist	
	Receipt For:	Aggregate	e Year-to-Date ▼	7
	Primary General			1
	Other (specify) ▼		250.00]
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S	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 50 / 128
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or	for commercial purposes, other than using the	name and add	lress of any political committee to	solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
	American College of Radiology Associa	ation		
Α.	Full Name (Last, First, Middle Initial) DR James Thesing			Date of Receipt
	Mailing Address 502 N Leavitt Ct			01 11 2007
	City	State	Zip Code	Transaction ID: 18385200
	Daniel Island	SC	29492-7571	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Self-Employed	Occupation Diagnost	n ic Radiologist	
	Receipt For:		Year-to-Date ▼	
	Primary General			1
	Other (specify)		500.00	
В.	Full Name (Last, First, Middle Initial) DR Charles Chung			Date of Receipt
	Mailing Address 150 Via Foresta Ln			01 11 2007
	City	State	Zip Code	Transaction ID: 18385201
	Williamsville	NY	14221-1983	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		365.00
	Name of Employer Univ of North Carolina	Occupation	n ic Radiologist	
	Receipt For:		Year-to-Date ▼	
	Primary General	199.79		1
	Other (specify)		365.00	
<u> </u>	Full Name (Last, First, Middle Initial) DR David Malamed			Date of Receipt
٠.	Mailing Address Phoenixville Hospital			M M / D D / Y Y Y Y Y O T D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	140 Nutt Rd	State	Zip Code	Transaction ID: 18385202
	Phoenixville	PA	19460-3900	
		17	19400-3900	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer University of PA	Occupation Diagnosti	n ic Radiologist	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General			1
	Other (specify) ▼		250.00	
_				
s	UBTOTAL of Receipts This Page (optional)			1115.00
\vdash	. 3 (17			_

S	SCHEDULE A (FEC Form 3X)		Llea coparata cabadula(s)	FOR LINE NUMBER: PAGE 51 / 128
	EMIZED RECEIPTS	Use separate schedule(s) or each category of the		(check only one)
••	LIMIZED NEOEII 13		Detailed Summary Page	X 11a 11b 11c 12
Δ.	y information copied from such Reports and Sta	atomonto mo	r not be cold or used by any nore	13 14 15 16 17
or	for commercial purposes, other than using the r	name and add	lress of any political committee to	o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
	American College of Radiology Associa	ition		
A.				Date of Receipt
	Mailing Address 451 Lake of the Woods	Blvd		01 11 2007
	City	State	Zip Code	Transaction ID: 18385204
	Akron	OH	44333-2791	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Radiology & Imaging Servi- ces, Inc.	Occupation Diagnosti	n c Radiologist	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General	-	250.00	7
	Other (specify) 🔻	0 0	250.00	
В.	Full Name (Last, First, Middle Initial) DR David Dowe			Date of Receipt
	Mailing Address 625 Park PI			0 1 1 1 2 0 0 7
	City	State	Zip Code	Transaction ID: 18385205
	Absecon	NJ	08205-6013	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		365.00
	Name of Employer AMI	Occupation	n c Radiologist	
	Receipt For:		Year-to-Date ▼	
	Primary General			7
	Other (specify)	0 0	365.00	
C.	Full Name (Last, First, Middle Initial) DR Mary Greene			Date of Receipt
	Mailing Address 1292 Oakleaf Dr			0 1
	City	State	Zip Code	Transaction ID: 18385206
	Dayton	OH	45434-8003	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Dayton Pediatric Imaging	Occupation Diagnost	n c Radiologist	
	Receipt For:	Aggregate	Year-to-Date ▼	_
	Primary General Other (specify)	' '	250.00	
_	Other (Specify)	0 0		
s				205.00
L	UBTOTAL of Receipts This Page (optional)			865.00

S	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 52 / 128
	· ·		Use separate schedule(s) or each category of the	(check only one)
П	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
				13 14 15 16 17
Ar	y information copied from such Reports and States for commercial purposes, other than using the i	atements may	not be sold or used by any person	on for the purpose of soliciting contributions
or		name and add	aress of any political committee to	Solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
\angle	American College of Radiology Associa	ation		
A.	Full Name (Last, First, Middle Initial) DR J Randall Jester			Date of Receipt
	Mailing Address 5227 Lee Ave			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 18385207
	Downers Grove	IL	60515-4303	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		500.00
	Name of Employer Self-employed	Occupation	n ic Radiologist	
	Receipt For:		Year-to-Date ▼	
	Primary General	33 -3		1
	Other (specify) ▼		500.00	
				d .
В.	Full Name (Last, First, Middle Initial) DR Thomas Sullivan			Date of Receipt
	Mailing Address Humana Hospital Clear	Lake		M M / D D / Y Y Y Y
	500 Medical Center Blv	b		01 11 2007
	City	State	Zip Code	Transaction ID: 18385208
	Webster	TX	77598-4220	Amount of Each Receipt this Period
	FEC ID number of contributing	С		250.00
	federal political committee.	<u> </u>		230.00
	Name of Employer	Occupation	<u> </u>	
	Name of Employer SW Radiology Association		ic Radiologist	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General		050.00	1
	Other (specify) ▼		250.00	
	Full Name (Last, First, Middle Initial)			
C.	DR Michael Grantham			Date of Receipt
	Mailing Address 50591 Glenshire Ct			01 11 2007
	City	State	Zip Code	Transaction ID: 18385213
	Granger	<u>IN</u>	46530-4978	Amount of Each Receipt this Period
	FEC ID number of contributing	С		250.00
	federal political committee.			
	Name of Employer Radiology, Inc.	Occupation Diagnosti	n ic Radiologist	
	Receipt For:		Year-to-Date ▼	
	Primary General	111		1
	Other (specify) ▼		250.00	
				1000.00
s	UBTOTAL of Receipts This Page (optional)			1000.00
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S	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 53 / 128
	· ·		Use separate schedule(s) or each category of the	(check only one)
Ш	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
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Ar	ly information copied from such Reports and St for commercial purposes, other than using the	atements may	not be sold or used by any person	on for the purpose of soliciting contributions
or	for commercial purposes, other than using the	name and add	dress of any political committee to	solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
	American College of Radiology Associa	ation		
Α.	Full Name (Last, First, Middle Initial) DR Anthony Scuderi			Date of Receipt
	Mailing Address 326 Gardner St			01 11 2007
	City	State	Zip Code	Transaction ID: 18385214
	Johnstown	PA	15905-2528	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Self-Employed	Occupation Diagnost	n ic Radiologist	
	Receipt For:		Year-to-Date ▼	
	Primary General			1
	Other (specify) ▼	0 0	500.00	
_	Full Name (Last, First, Middle Initial)			
В.				Date of Receipt
	Mailing Address 1210 Page Ter			01 11 7 2007
	City	State	Zip Code	Transaction ID: 18385215
	Villanova	PA	19085-2132	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Self-Employed	Occupation	n ic Radiologist	7
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General			1
	Other (specify) ▼		250.00	
— С.	Full Name (Last, First, Middle Initial)			Data of Pagaint
U.	DR John Cullen Ruff Mailing Address 3132 17th St N			Date of Receipt
	Walling / Radioss 3/32 1/(11/3(N			01 11 2007
	City	State	Zip Code	Transaction ID: 18385219
	Arlington	VA	22201-5202	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer	Occupation	1	
	Fairfax Radiological Cons- ultants, P.C		ic Radiologist	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General		500.00	1
	Other (specify)		500.00	
_				
				1250.00
S	UBTOTAL of Receipts This Page (optional)		······································	1230.00
			<u> </u>	

COUEDING A (FEC Form 2V)				FOR LINE NUMBER: PAGE 54 / 128
51	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	(check only one)
IT	EMIZED RECEIPTS	or each category of the		X 11a 11b 11c 12
			Detailed Summary Page	
				13 14 15 16 17
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may ame and add	r not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
\rangle	American College of Radiology Associa	tion		
Α.	Full Name (Last, First, Middle Initial) DR Andrew Warheit			Date of Receipt
	Mailing Address 15 Callaway Cir			01 11 2007
	City	State	Zip Code	Transaction ID: 18385220
	Loudonville	NY	12211-2639	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Northeast Medical Imaging PC	Occupation Radiologi		
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	2
	Other (specify) ▼		250.00	
В.	Full Name (Last, First, Middle Initial) DR Daniel Wunder			Date of Receipt
	Mailing Address 110 Meadowpointe E	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	City	State	Zip Code	Transaction ID: 18385221
	Hendersonville	TN	37075-5917	Amount of Each Receipt this Period
			01010 0011	Amount of Each recorpt this i ched
	FEC ID number of contributing federal political committee.	C		365.00
	Name of Employer Advanced Diagnostic Imagi-	Occupation	n ic Radiologist	
	ng, PC Receipt For:	. ·	Year-to-Date V	
	Primary General	Aggregate	Teal-10-Date V	,
	Other (specify) ▼		365.00	
<u> </u>	Full Name (Last, First, Middle Initial) DR William Woodruff, III			Date of Receipt
	Mailing Address High Pt Radiological Srv 624 Quaker Ln Ste 117E			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 18385222
	High Point	NC	27262-3832	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer High Pt Radiological Srv PA	Occupation Radiologi		7
	Receipt For:		Year-to-Date ▼	
	Primary General			1
	Other (specify) ▼		250.00	
				865.00
S	UBTOTAL of Receipts This Page (optional)			805.00

S	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 55 / 128
			Use separate schedule(s) or each category of the	(check only one)
П	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
			, ,	13 14 15 16 17
Ar	y information copied from such Reports and St	atements may	not be sold or used by any person	on for the purpose of soliciting contributions
or	for commercial purposes, other than using the	name and add	dress of any political committee to	solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
\angle	American College of Radiology Associa	ation		
Α.	Full Name (Last, First, Middle Initial) DR Daryl Chinn			Date of Receipt
	Mailing Address 1255 Somerset Lane			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 18385225
	Newport Beach	CA	92660-5632	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		250.00
	Name of Employer California Advanced Imagi-	Occupation	n ic Radiologist	
	ng Medical As Receipt For:		Year-to-Date V	_
	Primary General	Aggregate	Teal to Bate V	1
	Other (specify)		250.00	
		0 0	0 0 0 0 0 0 0	
В.	Full Name (Last, First, Middle Initial) DR Suzanne Slonim			Date of Receipt
	Mailing Address 4435 Holland Ave			M M / D D / Y Y Y Y
				01 11 2007
	City	State	Zip Code	Transaction ID: 18385226
	<u>Dallas</u>	TX	75219-2134	Amount of Each Receipt this Period
	FEC ID number of contributing	С		250.00
	federal political committee.			
	Name of Employer Palo Alto VA Hospital	Occupation	1	
	Palo Alto VA Hospital	Diagnosti	ic Radiologist	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General	-	050.00	1
	Other (specify)	0 0	250.00	
_	Full Name (Last, First, Middle Initial)			
C.	DR Louis Pacilio			Date of Receipt
	Mailing Address 503 Audubon Rd			01 11 2007
	City	State	Zip Code	Transaction ID: 18385227
	Leeds	MA	01053-9755	Amount of Each Receipt this Period
	FEC ID number of contributing	С		250.00
	federal political committee.			
	Name of Employer Northampton Radiologic As-	Occupation		
	soc., Inc.		ic Radiologist	_
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	,
	Other (specify)		250.00	
				1
ء	UBTOTAL of Receipts This Page (optional)			750.00
\vdash				-

C		[FOR LINE NUMBER: PAGE 56 / 128		
5	CHEDULE A (FEC Form 3X)	Use separate schedule(s)		(check only one)		
IT	EMIZED RECEIPTS	or each category of the		X 11a 11b 11c 12		
			Detailed Summary Page			
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or	ly information copied from such Reports and St for commercial purposes, other than using the	name and add	rnot be sold or used by any persol lress of any political committee to	on for the purpose of soliciting contributions oscilicit contributions from such committee.		
\setminus	NAME OF COMMITTEE (In Full)					
\rangle	American College of Radiology Associa	ation				
Α.	Full Name (Last, First, Middle Initial) DR John Hamide			Date of Receipt		
	Mailing Address 4720 Carthage St			01 11 2007		
	City	State	Zip Code	Transaction ID: 18385229		
	Metairie	LA	70002-1402	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		500.00		
	Name of Employer Oschner Clinic	Occupation Diagnosti	n c Radiologist			
	Receipt For:	Aggregate	Year-to-Date ▼			
	Primary General	' '	500.00	7		
	Other (specify)	0 0	300.00			
— В.	Full Name (Last, First, Middle Initial) DR Michael Rodriguez			Date of Receipt		
Ь.	·					
	Mailing Address 9A Lana Ln	0 1 1 1 2 0 0 7				
	City	State	Zip Code	Transaction ID: 18385233		
	Houston	TX	77027-5605	Amount of Each Receipt this Period		
	FEC ID number of contributing					
	federal political committee.	C		525.00		
	Name of Employer	l Occupation		_		
	Name of Employer Southwest Radiology Assoc-	Occupation				
	iation Receipt For:		c Radiologist Year-to-Date ▼	_		
	Primary General	Aggregate	Teal-10-Date ▼	7		
	Other (specify)		525.00			
		0 0		1		
<u> </u>	Full Name (Last, First, Middle Initial) DR Scott Blumenfeld			Date of Receipt		
	Mailing Address 708 Waltham Ct			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	City	State	Zip Code	Transaction ID: 18385235		
	El Paso	TX	79922-2128	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		250.00		
	Name of Employer	Occupation	1	┪		
	Providence Imaging Consultants, P.A.		c Radiologist			
	Receipt For:		Year-to-Date ▼	7		
	Primary General	33 -3-44		1		
	Other (specify) ▼		250.00			
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ء	UBTOTAL of Receipts This Page (optional)			1275.00		
\vdash	or its or its or age (optional)					

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)		FOR LINE NUMBER: PAGE 57 / 128
	EMIZED RECEIPTS		or each category of the	(check only one)
11	EMIZED RECEIP 13		Detailed Summary Page	X 11a 11b 11c 12
				13 14 15 16 17
Ar or	ny information copied from such Reports and Stat for commercial purposes, other than using the na	tements may ame and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
\rangle	American College of Radiology Associat	ion		
Α.	Full Name (Last, First, Middle Initial) DR William Russell			Date of Receipt
	Mailing Address 9625 Jaquima Rd			01 11 7 2007
	City	State	Zip Code	Transaction ID: 18385237
	Atascadero	CA	93422-1165	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Radiology Associates	Occupation Diagnost	n ic Radiologist	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General		050,00	1
	Other (specify)		250.00	
В.	Full Name (Last, First, Middle Initial) DR Bradley Dick			Date of Receipt
	Mailing Address Suburban Hospital 8600 Old Georgetown Ro	d		01 11 2007
	City	State	Zip Code	Transaction ID: 18385239
	Bethesda	MD	20814-1497	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer Suburban Hospital	Occupation		
	- Jubul ball 1 lospital		ic Radiologist	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary ☐ General Other (specify) ▼		1000.00	
<u> </u>	Full Name (Last, First, Middle Initial) DR Marvin Walker			Date of Receipt
	Mailing Address 153 37th St			M M / D D / Y Y Y Y Y O T O T O T O T O T O T O T O
	City	State	Zip Code	Transaction ID: 18385240
	Des Moines	IA	50312-4303	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Iowa Radiology	Occupation Diagnost	n ic Radiologist	
	Receipt For:		e Year-to-Date ▼	
	Primary General	-		1
	Other (specify) ▼		250.00	1
Г				1500.00
S	UBTOTAL of Receipts This Page (optional)		······	1000.00

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 58 / 128		
ITEMIZED RECEIPTS			or each category of the	(check only one)		
11	EIVIIZED NECEIP 13		Detailed Summary Page	X 11a 11b 11c 12		
				13 14 15 16 17		
Ar or	ny information copied from such Reports and Sta for commercial purposes, other than using the n	itements may name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions a solicit contributions from such committee.		
\setminus	NAME OF COMMITTEE (In Full)					
\rangle	American College of Radiology Associa	tion				
Α.	Full Name (Last, First, Middle Initial) DR Penni Barrett			Date of Receipt		
	Mailing Address 5028 E 84th St			$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$		
	City	State	Zip Code	Transaction ID: 18385243		
	Tulsa	OK	74137-2000	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		500.00		
	Name of Employer Radiology Consultants of Tulsa	Occupation	n ic Radiologist			
	Receipt For:	Aggregate	e Year-to-Date ▼	7		
	Primary General	1 1	500.00	1		
	Other (specify) ▼	0 0	500.00			
В.	Full Name (Last, First, Middle Initial) DR Robert Stanley			Date of Receipt		
	Mailing Address Univ of AL at Birmingha 500 S 22nd St Rm 504A	0 1 1 2 2 0 0 7				
	City	State	Zip Code	Transaction ID: 18396552		
	Birmingham	AL	35233-3110	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	С		250.00		
	Name of Employer Univ of Alabama at Birmin-	Occupation	n	7		
	Univ of Alabama at Birmin- gham	Diagnost	ic Radiologist			
	Receipt For:	Aggregate	e Year-to-Date ▼			
	Primary ☐ General Other (specify) ▼		250.00			
— С.	Full Name (Last, First, Middle Initial) DR Gary Scott			Date of Receipt		
٠.	Mailing Address Radiology Group 1722 Pine St Ste 203			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	City	State	Zip Code	Transaction ID: 18396553		
	Montgomery	AL	36106-1158	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		365.00		
	Name of Employer Radiology Group	Occupation Diagnost	n ic Radiologist	7		
	Receipt For:		e Year-to-Date ▼	7		
	Primary General	1	205.00	1		
	Other (specify) ▼	0 0	365.00			
6	UBTOTAL of Receipts This Page (optional)			1115.00		
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0]		FOR LINE NUMBER: PAGE 59 / 128
5	CHEDULE A (FEC Form 3X)	Use separate schedule(s)		(check only one)
IT	EMIZED RECEIPTS	or each category of the		
			Detailed Summary Page	
_				13 14 15 16 17
Ar or	y information copied from such Reports and St for commercial purposes, other than using the	atements may name and ado	r not be sold or used by any person lress of any political committee to	on for the purpose of soliciting contributions oscilcit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full)			
\rangle	American College of Radiology Associa	ation		
Α.	Full Name (Last, First, Middle Initial) DR Mitchell Travis			Date of Receipt
	Mailing Address 1931 N Main St			$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$
	City	State	Zip Code	Transaction ID: 18396555
	Auburn	IN	46706-1053	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Self-Employed	Occupation Diagnosti	n c Radiologist	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼	' '	250.00	
	Other (specify)	0 0	1 1 1 1 1 1 1	J.
— В.	Full Name (Last, First, Middle Initial) DR Kyoung-Soo Bae			Date of Receipt
	Mailing Address 2592 Bloomfield Crossi	M M / D D / Y Y Y Y		
		01 12 2007		
	City	State	Zip Code	Transaction ID: 18396556
	Bloomfield Hills	MI	48304-1708	Amount of Each Receipt this Period
	FEC ID number of contributing			250.00
	federal political committee.	C		250.00
	Name of Employer Saratoga General Hospital	Occupation	1	7
	Saratoga General Hospital	Diagnosti	c Radiologist	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General		250.00	1
	Other (specify)	0 0	230.00	J
<u> </u>	Full Name (Last, First, Middle Initial) DR David Plone			Date of Receipt
	Mailing Address 10243 North 99th St			M M / D D / Y Y Y Y Y O T D D D D D D D D D D D D D D D D D D
	City	State	Zip Code	Transaction ID: 18396557
	Scottsdale	AZ	85258-4713	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		1000.00
	Name of Employer Medical Diagnostic Imaging	Occupation		
	Group		c Radiologist	\dashv
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General	' '	1000.00	
	Other (specify)	1 1	1000.00	.1
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1				4500.00
s	UBTOTAL of Receipts This Page (optional)			1500.00
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SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 60) / 128	
ıт	EMIZED RECEIPTS		or each category of the	(check only one)	
••	LIVIIZED HEOLII 13		Detailed Summary Page		12 16
Δr	y information copied from such Reports and Statements	ma	y not be sold or used by any perso		
or	for commercial purposes, other than using the name and	d ad	dress of any political committee to	solicit contributions from such commit	tee.
\setminus	NAME OF COMMITTEE (In Full)				
$ \rangle$	American College of Radiology Association				
\angle					
Α.	Full Name (Last, First, Middle Initial) Josie Schmid Timm			Date of Receipt	
۸.	Mailing Address 21 West Lane			╡	YY
	West Lane				0 7
	City State	e	Zip Code	Transaction ID: 18434029	
	Houston TX		77019-1007	Amount of Each Receipt this Per	iod
	FEC ID number of contributing federal political committee			25	50.00
	federal political committee.				0.00
	Name of Employer Occup Self-Employed Diagram	patio	n	7	
	Self-Employed Diagr	nost	tic Radiologist		
	Receipt For: Aggre	egate	e Year-to-Date ▼		
	Primary General		250.00		
	Other (specify) ▼		200.00		
_	Full Name (Last, First, Middle Initial)				
В.	,			Date of Receipt	
	Mailing Address 810 Douglas St				YY
					0 0 7
	City Stat		Zip Code	Transaction ID: 18434030	
	<u>Alexandria</u> <u>MN</u>	_	56308-1735	Amount of Each Receipt this Per	iod
	FEC ID number of contributing federal political committee.			25	50.00
		_			
	Name of Employer Occup	-			
	Diagi		tic Radiologist		
	Receipt For: Aggree Primary General	egate	e Year-to-Date ▼		
	Other (specify) ▼		250.00		
	(4)	0	0 0 0 0 0 0 0		
	Full Name (Last, First, Middle Initial)				
C.	DR Marc Gollub			Date of Receipt	
	Mailing Address 44 W 62nd St Apt 26A			01 17 20	0.7
	City Stat	e	Zip Code	Transaction ID: 18434033	0,1
	New York NY		10023-7013	Amount of Each Receipt this Per	riod
	FFC ID number of contributing	-			1 1
	federal political committee.			50	00.00
	Name of Employer Occup	natio	'n	-	
	Mem Sloan-Kettering Cancer	•	tic Radiologist		
	<u> </u>		e Year-to-Date V	-	
	Primary General				
	Other (specify) ▼		500.00		
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				100	0.00
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1 1	OTAL This Period (last page this line number only)				

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBE	R: PAGE 61 / 128
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or	ly information copied from such Reports and St for commercial purposes, other than using the	name and add	dress of any political committee to	solicit contributions fr	on such committee.
	NAME OF COMMITTEE (In Full)				
$ \rangle$	American College of Radiology Associa	ation			
\angle	3 37				
	Full Name (Last, First, Middle Initial)			5	
A.	DR Drew Lambert	0.		Date of Receipt	
	Mailing Address 3311 S Massachusetts	St			17 2007
	City	State	Zip Code	Transaction ID:	
	Seattle	WA	98144-4029		Receipt this Period
	FEC ID number of contributing			7 6. 246.	
	federal political committee.	C			250.00
	Name of Francisco	0			
	Name of Employer Group Health Cooperative	Occupation	n ic Radiologist		
	Receipt For:		Year-to-Date V		
	Primary General	riggrogato	Tour to Bute V	1	
	Other (specify) ▼		250.00		
				·	
	Full Name (Last, First, Middle Initial)				
В.	DR Sandra Arroyo-Ferrer			Date of Receipt	
	Mailing Address PO Box 876				17 2007
	City	State	Zip Code	Transaction ID:	
	Mayaguez	PR	00681-0876		Receipt this Period
			00001 0070	Amount of Laci	
	FEC ID number of contributing federal political committee.	C			365.00
	·	-			
	Name of Employer Self-Employed	Occupation			
	Receipt For:		ic Radiologist Year-to-Date ▼		
	Primary General	Aggregate	Flear-to-Date V	1	
	Other (specify)		365.00		
				1	
_	Full Name (Last, First, Middle Initial)				
C.	DR Donald Schumacher			Date of Receipt	
	Mailing Address 1596 Hodgson Rd				1 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID:	
	Whitefish	MT	59937-8417		Receipt this Period
	FEC ID number of contributing				
	federal political committee.	C			500.00
	Name of Employer	Occupation	2		
	Northwest Imaging		ic Radiologist		
	Receipt For:		Year-to-Date ▼		
	Primary General	199.19		1	
	Other (specify) ▼		500.00		
_		-			
				-	4445.00
s	UBTOTAL of Receipts This Page (optional)				1115.00
T	OTAL This Period (last page this line number of	only)	>		

S	CHEDULE A (FEC Form 3X)		Llea coparata cabadula(c)	FOR LINE NUMBER: PAGE 62 / 128
	EMIZED RECEIPTS		Use separate schedule(s) or each category of the	(check only one)
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				13 14 15 16 17
Ar or	ry information copied from such Reports and Sta for commercial purposes, other than using the r	atements may name and add	not be sold or used by any personal dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full)			
	American College of Radiology Associa	ation		
A.	Full Name (Last, First, Middle Initial) DR Michael Lee			Date of Receipt
	Mailing Address 804 Lakeridge Dr			01 17 2007
	City	State	Zip Code	Transaction ID: 18434260
	Keller	TX	76248-8409	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		365.00
	Name of Employer Envision Radiology	Occupation Diagnost	n ic Radiologist	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General		365.00	1
	Other (specify) ▼	1 1		
— В.	Full Name (Last, First, Middle Initial) DR Scott Miller			Date of Receipt
	Mailing Address Major Hospital			M M / D D / Y Y Y Y
	150 W Washington St	0	7' 0 1	01 17 2007
	City	State	Zip Code	Transaction ID: 18434445
	Shelbyville	IN	46176-1265	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		250.00
	Name of Employer X-Ray Physicians of Shelb-	Occupation		
	yville		ic Radiologist	
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	
	Other (specify)		250.00	
	Callet (openity) \	0 0		
<u>с.</u>	Full Name (Last, First, Middle Initial) DR George Heard, JR			Date of Receipt
	Mailing Address 1190 Sequoya Trail			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 18434449
	Columbia	TN	38401-8411	Amount of Each Receipt this Period
	FEC ID number of contributing			300.00
	federal political committee.	C		300.00
	Name of Employer Self-Employed	Occupation		7
			ic Radiologist	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		300.00	
	Suite (openity) \	0 0		1
				915.00
S	UBTOTAL of Receipts This Page (optional)		·····	913.00
_	OTAL This Period (last page this line number o	ınlv))	

S	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 63 / 128
	•		Use separate schedule(s) or each category of the	(check only one)
П	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
				13 14 15 16 17
Ar	y information copied from such Reports and St	atements may	not be sold or used by any person	on for the purpose of soliciting contributions
or	for commercial purposes, other than using the	name and add	dress of any political committee to	solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
\angle	American College of Radiology Associa	ation		
Α.	Full Name (Last, First, Middle Initial) DR Edward Bruno			Date of Receipt
	Mailing Address 25654 W Plantation Ro			01 17 2007
	City	State	Zip Code	Transaction ID: 18434450
	Plainfield	IL	60586-8257	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Joliet Radiological, S.C.	Occupation	n ic Radiologist	7
	Receipt For:		Year-to-Date ▼	
	Primary General			1
	Other (specify) ▼		250.00	
В.	Full Name (Last, First, Middle Initial) DR Walter Holloman			Date of Receipt
	Mailing Address 65 Meadowbrook Coun	try Club Est	1	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 18434666
	Ballwin	MO	63011-1697	Amount of Each Receipt this Period
			03011 1037	Amount of Lacri Necelpt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer	Occupation	1	-
	Midwest Radiológical Associates	Diagnost	ic Radiologist	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General		050.00	1
	Other (specify)	0 0	250.00	
<u> </u>	Full Name (Last, First, Middle Initial) DR Gregory Connor			Data of Pagaint
O.	Mailing Address 628 W Home Ave			Date of Receipt
	Walling Address 628 W Home Ave			01 17 2007
	City	State	Zip Code	Transaction ID: 18434668
	<u>Hartsville</u>	SC	29550-4430	Amount of Each Receipt this Period
	FEC ID number of contributing			250.00
	federal political committee.	С		250.00
	Name of Employer Byerly Hospital	Occupation	n ic Radiologist	
	Receipt For:		e Year-to-Date ▼	_
	Primary General	Aggregate	, roal to Date ▼	1
	Other (specify)		250.00	
		0 0		4
5	UBTOTAL of Receipts This Page (optional)			750.00
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_				FOR LINE NUMBER: PAGE 64 / 128
5	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	(check only one)
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Ar or	ly information copied from such Reports and Sta for commercial purposes, other than using the r	atements may name and add	not be sold or used by any perse dress of any political committee to	on for the purpose of soliciting contributions oscilcit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full)			
	American College of Radiology Associa	tion		
Α.	Full Name (Last, First, Middle Initial) DR W Caldwell Sims			Date of Receipt
	Mailing Address 1902 Royalty Dr Ste 18	0		01 17 2007
	City	State	Zip Code	Transaction ID: 18434669
	Pomona	CA	91767-3012	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Renaissance Radiology Medical Group, I Receipt For: Primary General Other (specify)		n ic Radiologist Year-to-Date ▼ 250.00	
— В.	Full Name (Last, First, Middle Initial) DR Richard Stiles			Date of Receipt
	Mailing Address 2461 Fawn Ridge			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 18434863
	Stone Mountain	GA	30087-1213	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Atlanta Radiology Consult- ants, PC Receipt For: Primary General Other (specify) ▼	,	n ic Radiologist e Year-to-Date ▼	
_	Full Name (Last, First, Middle Initial)			Date of Receipt
U .	DR Paul Parsons Mailing Address Sacramento Rad Med G 3291 Ramos Cir	Group		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 18434864
	Sacramento	CA	95827-2516	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.			250.00
	Name of Employer Sacramento Rad Med Group		ic Radiologist	
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 250.00	
s	UBTOTAL of Receipts This Page (optional)			1000.00

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 65 / 128
	EMIZED RECEIPTS		or each category of the	(check only one)
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Ar	ny information copied from such Reports and Sta for commercial purposes, other than using the n	atements may	/ not be sold or used by any perso	on for the purpose of soliciting contributions a solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
$ \rangle$	American College of Radiology Associa	tion		
\angle				
Α.	Full Name (Last, First, Middle Initial) DR Joshua Abramowitz			Date of Receipt
۸.	Mailing Address 72 Saint Stephens Scho	ol Bd		M M / D D / Y Y Y Y
		01 18 2007		
	City	State	Zip Code	Transaction ID: 18488842
	Austin	TX	78746-2524	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer	Occupatio	n	┥
	Austin Radiological Assoc- iates	Diagnost	ic Radiologist	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		1000.00	
	Other (specify)	0 0		1
<u> </u>	Full Name (Last, First, Middle Initial) DR Michael Aronoff			Date of Receipt
	Mailing Address 9609 Tobrina Ln	M M / D D / Y Y Y Y		
		01 18 2007		
	City	State	Zip Code	Transaction ID: 18488843
	Austin	TX	78759-7708	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		1000.00
	Name of Employer Austin Radiological Assoc	Occupation		7
		· ·	ic Radiologist	
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	
	Other (specify)	' '	1000.00	
	care (epos.,), \			1
<u> </u>	Full Name (Last, First, Middle Initial) DR Sarah Avery			Date of Receipt
•	Mailing Address 3206 Glenview Ave			M M / D D / Y Y Y Y
				01 18 2007
	City	State	Zip Code	Transaction ID: 18488844
	Austin	TX	78703-1445	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer Austin Radiological Assoc-	Occupation		
	iation		ic Radiologist	_
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	
	Other (specify)	' '	1000.00	
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	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 66 / 128 (check only one)
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An or	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may ame and add	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) American College of Radiology Associa	tion		
4.	Full Name (Last, First, Middle Initial) DR William Banks Mailing Address 10909 Range View Dr			Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 18488845
	Austin	TX	78730-3569	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		1000.00
	Name of Employer Austin Radiological Associates Receipt For: Primary General Other (specify)		n ic Radiologist e Year-to-Date ▼ 1000.00	
3.	Full Name (Last, First, Middle Initial) DR Lori Barr			Date of Receipt
	Mailing Address Austin Radiological Ass 10900 Stonelake Blvd S	01 18 2007		
	City Austin	State TX	Zip Code 78759-5873	Transaction ID: 18488846 Amount of Each Receipt this Period
	FEC ID number of contributing	C	76739-3673	1000.00
	federal political committee.			
	Name of Employer Austin Radiological Assoc	Occupation	n ic Radiologist	
	Name of Employer	Occupation Diagnost		
	Name of Employer Austin Radiological Assoc Receipt For: Primary General	Occupation Diagnost	ic Radiologist e Year-to-Date ▼	Date of Receipt
- .	Name of Employer Austin Radiological Assoc Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) DR Hillel Ben-Avi Mailing Address 4501 Spanish Oak Trl	Occupation Diagnost Aggregate	ic Radiologist e Year-to-Date ▼ 1000.00	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
D .	Name of Employer Austin Radiological Assoc Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) DR Hillel Ben-Avi Mailing Address 4501 Spanish Oak Trl City	Occupation Diagnost Aggregate State	ic Radiologist e Year-to-Date ▼ 1000.00 Zip Code	0 1 1 8 2 0 0 7 Transaction ID: 18488849
C .	Name of Employer Austin Radiological Assoc Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) DR Hillel Ben-Avi Mailing Address 4501 Spanish Oak Trl	Occupation Diagnost Aggregate	ic Radiologist e Year-to-Date ▼ 1000.00	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
C .	Name of Employer Austin Radiological Assoc Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) DR Hillel Ben-Avi Mailing Address 4501 Spanish Oak Trl City Austin FEC ID number of contributing federal political committee. Name of Employer Austin Radiological Associates	State TX C Occupatio Diagnost	ic Radiologist Year-to-Date 1000.00 Zip Code 78731-5217	Transaction ID: 18488849 Amount of Each Receipt this Period
D.	Name of Employer Austin Radiological Assoc Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) DR Hillel Ben-Avi Mailing Address 4501 Spanish Oak Trl City Austin FEC ID number of contributing federal political committee. Name of Employer Austin Radiological Assoc-	State TX C Occupatio Diagnost	ic Radiologist Year-to-Date 1000.00 Zip Code 78731-5217	Transaction ID: 18488849 Amount of Each Receipt this Period
S.	Name of Employer Austin Radiological Assoc Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) DR Hillel Ben-Avi Mailing Address 4501 Spanish Oak Trl City Austin FEC ID number of contributing federal political committee. Name of Employer Austin Radiological Associates Receipt For: Primary General	State TX C Occupation Diagnost Aggregate	Zip Code 78731-5217 Tic Radiologist 2 Year-to-Date ▼ 1000.00	Transaction ID: 18488849 Amount of Each Receipt this Period 1000.00

S	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 67 / 128
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			Detailed Summary Page	13 14 15 16 17
Δr	ny information copied from such Reports and Sta	atements may	y not be sold or used by any perso	
or	for commercial purposes, other than using the r	name and add	lress of any political committee to	solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full)			
\rangle	American College of Radiology Associa	ition		
Α.	Full Name (Last, First, Middle Initial) DR Bradley Brenner			Date of Receipt
	Mailing Address Austin Radiological Ass 10900 Stonelake Blvd S			01 18 2007
	City	State	Zip Code	Transaction ID: 18488850
	Austin	TX	78759-5873	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer Austin Radiological Associates	Occupation	n ic Radiologist	
	Receipt For:		Year-to-Date ▼	
	Primary General			1
	Other (specify) ▼		1000.00	
В.	Full Name (Last, First, Middle Initial) DR Lauren Brown			Date of Receipt
	Mailing Address	ociates		M M / D D / Y Y Y Y
	PO Box 4099			01 18 2007
	City	State	Zip Code	Transaction ID: 18488851
	Austin	TX	78765-4099	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
		10		
	Name of Employer Austin Radiological Assoc-	Occupation		
	iates		ic Radiologist	
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	
	Other (specify)		1000.00	
	Curici (specify) •	0 0	1 1 1 1 1 1 1	1
<u> </u>	Full Name (Last, First, Middle Initial) DR Chris Butschek			Date of Receipt
	Mailing Address Austin Radiological Ass PO Box 4099	ос		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 18488852
	Austin	TX	78765-4099	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		1000.00
	Name of Employer	Occupation	1	-
	Austin Radiological Assoc-		ic Radiologist	
	iates Receipt For:	_	Year-to-Date ▼	_
	Primary General	55. 05410		1
	Other (specify) ▼		1000.00	
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SCHEDULE A (FEC Form 3X)

PAGE 68 / 128 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page _17** 13 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American College of Radiology Association Full Name (Last, First, Middle Initial) Date of Receipt **A.** DR Gregory Connor Mailing Address 2909 Cherry Ln 0.1 2007 18 Zip Code City State Transaction ID: 18488853 TX 78703-2821 **Austin** Amount of Each Receipt this Period FEC ID number of contributing 1000.00 C federal political committee. Name of Employer Austin Radiological Assoc-Occupation Diagnostic Radiologist iates Aggregate Year-to-Date ▼ Receipt For: Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) B. DR Newell Dutton Date of Receipt Mailing Address 3400 Stratford Hills Lane 0.1 18 2007 City State Zip Code Transaction ID: 18488855 **Austin** TX 78746-4687 Amount of Each Receipt this Period FEC ID number of contributing C 1000.00 federal political committee. Name of Employer Austin Radiological Assoc-Occupation Diagnostic Radiologist <u>iates</u> Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) C. DR David Feldman Date of Receipt Mailing Address Austin Radiological Assoc 2007 0.1 18 10900 Stonelake Blvd Ste 100 City State Zip Code Transaction ID: 18488856 Austin TX 78759-5826 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 C federal political committee. Name of Employer Austin Radiological Assoc-Occupation Diagnostic Radiologist iation Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 3000.00 SUBTOTAL of Receipts This Page (optional)

S	CHEDULE A (FEC Form 3X)		Llea coparata cabadula(s)	FOR LINE NUMBER: PAGE 69 / 128
	EMIZED RECEIPTS		Use separate schedule(s) or each category of the	(check only one)
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Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the r	atements may name and add	not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions of solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
	American College of Radiology Associa	ation		
A.	Full Name (Last, First, Middle Initial) DR Thomas Fletcher			Date of Receipt
	Mailing Address 2206 E Windsor Rd			01 18 2007
	City	State	Zip Code	Transaction ID: 18488857
	Austin	TX	78703-3119	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer Austin Radiological Assoc- iation	Occupation Diagnosti	n ic Radiologist	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General	-	1000.00	1
	Other (specify)	0 0	1000.00	
В.	Full Name (Last, First, Middle Initial) DR David Goldblatt			Date of Receipt
	Mailing Address PO Box 4099			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	
	Austin	TX	78765-4099	Transaction ID: 18488858 Amount of Each Receipt this Period
			70703 4033	
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer Austin Radiological Associates	Occupation Radiologi		
	Receipt For:		Year-to-Date ▼	
	Primary General		1000.00	1
	Other (specify)	0 0	1000.00	
C.	Full Name (Last, First, Middle Initial) Mark Gray			Date of Receipt
	Mailing Address 3007 Stratford Drive			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 18488859
	Austin	TX	78746-4650	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer Austin Radiological Assoc-	Occupation Radiologi		
	iation Receipt For:		Year-to-Date ▼	_
	Primary General	39 -3		7
	Other (specify) ▼		1000.00	
	UBTOTAL of Receipts This Page (optional)			3000.00
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_	OTAL This Period (last page this line number o	nlv)	ı	

S	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 70 / 128
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П	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
				13 14 15 16 17
Ar	y information copied from such Reports and St	atements may	not be sold or used by any perso	on for the purpose of soliciting contributions
or	for commercial purposes, other than using the	name and add	aress of any political committee to	solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
\angle	American College of Radiology Associa	ition		
Α.	Full Name (Last, First, Middle Initial) DR Michael Gunlock			Date of Receipt
	Mailing Address 4500 Steiner Ranch Blv	d Apt 1414		01 18 2007
	City	State	Zip Code	Transaction ID: 18488861
	Austin	TX	78732-2324	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		1000.00
	Name of Employer Austin Radiological Assoc-	Occupation	n ic Radiologist	
	iation Receipt For:		Year-to-Date ▼	
	Primary General	7 199. 094.0		1
	Other (specify) ▼		1000.00	
				1
В.	Full Name (Last, First, Middle Initial) DR Larry Hill			Date of Receipt
	Mailing Address Austin Radiological Ass	OC		M M / D D / Y Y Y Y
	PO Box 4099			01 18 2007
	City	State	Zip Code	Transaction ID: 18488862
	Austin	TX	78765-4099	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		1000.00
	Tederal political committee.			
	Name of Employer Austin Radiological Assoc-	Occupation		
	iates	Radiologi		
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼	' '	1000.00	
	☐ Other (specify) ♥	0 0	0 0 0 0 0 0 0	
<u> </u>	Full Name (Last, First, Middle Initial) DR Ronald Hoelscher			Date of Receipt
J.	Mailing Address 4601 Elohi Dr			M M / D D / Y Y Y Y
				01 18 2007
	City	State	Zip Code	Transaction ID: 18488863
	Austin	TX	78746-1642	Amount of Each Receipt this Period
	FEC ID number of contributing	С		1000.00
	federal political committee.			
	Name of Employer Austin Radiological Assoc.	Occupation Diagnosti	n ic Radiologist	
	Receipt For:		Year-to-Date ▼	7
	Primary General			1
	Other (specify)		1000.00	
				2000.00
s	UBTOTAL of Receipts This Page (optional)			3000.00
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71	CHEDULE A (FEC Form 3X)		l	FOR LINE NUMBER: PAGE 71 / 128
			Use separate schedule(s) or each category of the	(check only one)
П	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
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An or	y information copied from such Reports and Stator for commercial purposes, other than using the na	tements may ame and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{}$	NAME OF COMMITTEE (In Full)			
\rangle	American College of Radiology Associat	tion		
۹.	Full Name (Last, First, Middle Initial) DR John Hogg			Date of Receipt
	Mailing Address 1404 Wild Cat Holw			01 18 7 2007
	City	State	Zip Code	Transaction ID: 18488864
	Austin	TX	78746-3622	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		1000.00
	Name of Employer Austin Radiological Associates	Occupation Radiolog		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General		1000.00	1
	Other (specify)	0 0	1000.00	
3.	Full Name (Last, First, Middle Initial) DR Barry Horowitz			Date of Receipt
	Mailing Address 2020 Cerca Viejo Way			01 18 7 2007
	City	State	Zip Code	Transaction ID: 18488865
	Aati.a	TV		
	Austin	TX	78746-7384	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	78746-7384	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. Name of Employer	C Occupation	n	
	FEC ID number of contributing federal political committee. Name of Employer Austin Radiological Association	Occupation Diagnost	n ic Radiologist	
	FEC ID number of contributing federal political committee. Name of Employer Austin Radiological Association Receipt For:	Occupation Diagnost	n	
	FEC ID number of contributing federal political committee. Name of Employer Austin Radiological Association	Occupation Diagnost	n ic Radiologist	
 C.	FEC ID number of contributing federal political committee. Name of Employer Austin Radiological Association Receipt For: Primary General	Occupation Diagnost	n ic Radiologist e Year-to-Date ▼	
 C.	FEC ID number of contributing federal political committee. Name of Employer Austin Radiological Association Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial)	Occupation Diagnost Aggregate	n ic Radiologist e Year-to-Date ▼ 1000.00	Date of Receipt M
-	FEC ID number of contributing federal political committee. Name of Employer Austin Radiological Association Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) DR Connie Hsu Mailing Address Austin Radiological Association City	Occupation Diagnost Aggregate Diagnost Aggregate Diagnost Aggregate Diagnost State	n ic Radiologist e Year-to-Date ▼ 1000.00	Date of Receipt
 C.	FEC ID number of contributing federal political committee. Name of Employer Austin Radiological Association Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) DR Connie Hsu Mailing Address Austin Radiological Association 10900 Stonelake Blvd St	Occupation Diagnost Aggregate Occiation te 250	n ic Radiologist e Year-to-Date ▼ 1000.00	Date of Receipt M
D .	FEC ID number of contributing federal political committee. Name of Employer Austin Radiological Association Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) DR Connie Hsu Mailing Address Austin Radiological Association City	Occupation Diagnost Aggregate Diagnost Aggregate Diagnost Aggregate Diagnost State	n ic Radiologist e Year-to-Date ▼ 1000.00	Date of Receipt M M D D Y Y Y Y Y Y Y Y
D .	FEC ID number of contributing federal political committee. Name of Employer Austin Radiological Association Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) DR Connie Hsu Mailing Address Austin Radiological Association City Austin FEC ID number of contributing federal political committee. Name of Employer	Occupation Diagnost Aggregate Occiation te 250 State TX	n ic Radiologist e Year-to-Date ▼ 1000.00	Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
C .	FEC ID number of contributing federal political committee. Name of Employer Austin Radiological Association Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) DR Connie Hsu Mailing Address Austin Radiological Association FEC ID number of contributing federal political committee. Name of Employer Austin Radiological Association	Occupation te 250 State TX C Occupation Diagnost	n ic Radiologist e Year-to-Date ▼ 1000.00 Zip Code 78759-5873	Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
D.	FEC ID number of contributing federal political committee. Name of Employer Austin Radiological Association Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) DR Connie Hsu Mailing Address Austin Radiological Association FEC ID number of contributing federal political committee. Name of Employer Austin Radiological Association Receipt For:	Occupation te 250 State TX C Occupation Diagnost	n ic Radiologist e Year-to-Date ▼ 1000.00	Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
D.	FEC ID number of contributing federal political committee. Name of Employer Austin Radiological Association Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) DR Connie Hsu Mailing Address Austin Radiological Association FEC ID number of contributing federal political committee. Name of Employer Austin Radiological Association Receipt For: Primary General	Occupation te 250 State TX C Occupation Diagnost	n ic Radiologist e Year-to-Date ▼ 1000.00 Zip Code 78759-5873 n ic Radiologist e Year-to-Date ▼	Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
D.	FEC ID number of contributing federal political committee. Name of Employer Austin Radiological Association Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) DR Connie Hsu Mailing Address Austin Radiological Association FEC ID number of contributing federal political committee. Name of Employer Austin Radiological Association Receipt For:	Occupation te 250 State TX C Occupation Diagnost	n ic Radiologist e Year-to-Date ▼ 1000.00 Zip Code 78759-5873	Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
S.	FEC ID number of contributing federal political committee. Name of Employer Austin Radiological Association Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) DR Connie Hsu Mailing Address Austin Radiological Association FEC ID number of contributing federal political committee. Name of Employer Austin Radiological Association Receipt For: Primary General	Occupation te 250 State TX C Occupation Diagnost Aggregate	ic Radiologist e Year-to-Date ▼ 1000.00 Zip Code 78759-5873 n ic Radiologist e Year-to-Date ▼ 1000.00	Date of Receipt M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

S	CHEDULE A (FEC Form 3X)		Llea coparata cabadula(s)	FOR LINE NUMBER: PAGE 72 / 128
	EMIZED RECEIPTS		Use separate schedule(s) or each category of the	(check only one)
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Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the n	itements may name and add	not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions of solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
	American College of Radiology Associa	tion		
A.	Full Name (Last, First, Middle Initial) DR Kent Ibanez			Date of Receipt
	Mailing Address 3701 Josh Ln			01 18 2007
	City	State	Zip Code	Transaction ID: 18488867
	Austin	TX	78730-1513	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer Austin Radiological Assoc- iates	Occupation Diagnost	n ic Radiologist	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General		1000.00	7
	Other (specify)	0 0	1000.00	1
В.	Full Name (Last, First, Middle Initial) DR Ravi Jhaveri			Date of Receipt
	Mailing Address			M M / D D / Y Y Y Y
	10900 Stonelake Blvd S		7'- 0 - 1-	01 18 2007
	City	State	Zip Code	Transaction ID: 18488868
	Austin	TX	78759-5826	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer Austin Radiological Assoc-	Occupation		
	iates		ic Radiologist	
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	_
	Primary General Other (specify) ▼		1000.00	
		0 0		-
<u>с.</u>	Full Name (Last, First, Middle Initial) DR Gregory Karnaze			Date of Receipt
	Mailing Address PO Box 5749			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 18488869
	Austin	TX	78763-5749	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer	Occupation	1	
	Austin Radiological Association	Diagnost	ic Radiologist	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General		1000.00	7
	Other (specify) ▼		1000.00	1
S	UBTOTAL of Receipts This Page (optional)			3000.00
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SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 73 / 128
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\setminus	NAME OF COMMITTEE (In Full)			
\rangle	American College of Radiology Associat	ion		
Α.	Full Name (Last, First, Middle Initial) DR John Kish			Date of Receipt
	Mailing Address 3608 Travis Country Circ	cle		01 18 2007
	City	State	Zip Code	Transaction ID: 18488870
	Austin	TX	78735-6106	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer Austin Radiological Assoc- iation	Occupatio Diagnost	n ic Radiologist	7
	Receipt For:		e Year-to-Date ▼	
	Primary General			1
	Other (specify) ▼	0 0	1000.00	
В.	Full Name (Last, First, Middle Initial) DR Jeffrey Lava			Date of Receipt
	Mailing Address 4701 Ridge Oak Dr			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 18488871
	Austin	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer Austin Radiological Associates Receipt For: Primary General Other (specify)		n cic Radiologist e Year-to-Date ▼	
	Full Name (Last, First, Middle Initial)		0 0 0 0 0 0 0	4
C.	DR John Leahy			Date of Receipt
	Mailing Address Austin Radiological Asso 10900 Stonelake Blvd St			01 18 7 2007
	City	State	Zip Code	Transaction ID: 18488872
	Austin	TX	78759-5826	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer Austin Radiological Assoc- iation	Occupatio Diagnost	n ic Radiologist	7
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		1000.00	
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IT	EMIZED RECEIPTS		or each category of the	X 11a 11b 11c 12
			Detailed Summary Page	13 14 15 16 17
۸r	ny information copied from such Reports and Sta	atomonte mo	rnot ha cold or used by any pare	
or	for commercial purposes, other than using the r	name and add	dress of any political committee to	o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
$ \rangle$	American College of Radiology Associa	tion		
	American Conege of Hadiology Associa			
<u>/</u>	Full Name (Last, First, Middle Initial)			
A.	DR David Leake			Date of Receipt
	Mailing Address 6114 Mountainclimb Dr			M M / D D / Y Y Y Y
				01 18 2007
	City	State	Zip Code	Transaction ID: 18488873
	Austin	TX	78731-3824	Amount of Each Receipt this Period
	FEC ID number of contributing			1000.00
	federal political committee.	C		1000.00
	Name of Employer Austin Radiological Assoc-	Occupation		
	iates		ic Radiologist	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General	1	1000.00	1
	Other (specify)	0 0	1000.00	
В.	Full Name (Last, First, Middle Initial) DR Marcus Lines			Date of Receipt
υ.				-
	Mailing Address 7 Ehrlich Road			0 1 1 8 2 0 0 7
	City	State	Zip Code	Transaction ID: 18488874
	Austin	TX	78746-3110	Amount of Each Receipt this Period
		1/	70740 3110	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer Austin Radiological Assoc-	Occupation	า	
	iation	Diagnost	ic Radiologist	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General		1000.00	7
	Other (specify) ▼	0 0	1000.00	
_	Full Name (Last, First, Middle Initial) Dr. Gael Joan Lonergan			Date of Receipt
Ċ.	Mailing Address 2327 N Cuernavaca Dri	vo Ant D1		M M / D D / Y Y Y Y
	Walling Address 2327 N Guerriavada Dri	ve Apı. Dı		01 18 2007
	City	State	Zip Code	Transaction ID: 18488875
	Austin	TX	78733-2109	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		1000.00
	Name of Employer Austin Radiological Assoc-	Occupation		
	iation		ic Radiologist	_
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General	' '	1000.00	11
	Other (specify)		1000.00	1
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				3000.00
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S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 75 / 128
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Ar	ny information copied from such Reports and Sta	itements may	not be sold or used by any perso	
or	for commercial purposes, other than using the n	ame and add	dress of any political committee to	o solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full)			
	American College of Radiology Associa	tion		
A.	Full Name (Last, First, Middle Initial) DR John Manning			Date of Receipt
	Mailing Address Austin Radiological Asso 10900 Stonelake Blvd S			01 18 2007
	City	State	Zip Code	Transaction ID: 18488906
	Austin	TX	78759-5826	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer Austin Radiological Assoc- iation	Occupation	n ic Radiologist	
	Receipt For:		e Year-to-Date ▼	
	Primary General		1000.00	1
	Other (specify)	1 1	1000.00	
_	Full Name (Last, First, Middle Initial)			
В.				Date of Receipt
	Mailing Address Austin Radiological Assi PO Box 4099	n		0 1 1 8 2 0 0 7
	City	State	Zip Code	Transaction ID: 18488907
	Austin	TX	78765-4099	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer Austin Radiological Assoc-	Occupation		
	iates Receipt For:		ic Radiologist e Year-to-Date ▼	_
	Primary General	Aggregate		1
	Other (specify) ▼		1000.00	
<u>с</u> .	Full Name (Last, First, Middle Initial) DR Anthony Masaryk			Date of Receipt
	Mailing Address Austin Radiological Asso PO Box 4099	ос		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 18488908
	Austin	TX	78765-4099	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer Austin Radiological Assoc-	Occupation Radiolog		
	lation		e Year-to-Date ▼	
	Primary General			1
	Other (specify) ▼		1000.00	1
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SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 76 / 128
ITEMIZED RECEIPTS		or each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12
			13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may e name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American College of Radiology Associ	iation		
Full Name (Last, First, Middle Initial) A. DR Curtis McClurg			Date of Receipt
Mailing Address 2607 Stratford Dr			01 18 2007
City	State	Zip Code	Transaction ID: 18488909
Austin	TX	78746-4622	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1000.00
Name of Employer Austin Radiological Assoc- iates	Occupation Diagnost	n ic Radiologist	
Receipt For:		e Year-to-Date ▼	
Primary General Other (specify) ▼		1000.00	
Full Name (Last, First, Middle Initial) 3. DR Mark McLelland			Date of Receipt
Mailing Address PO Box 4099			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 18488910
Austin	TX	78765-4099	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1000.00
Name of Employer Austin Radiological Assoc-	Occupation		
iation Receipt For:		ic Radiologist e Year-to-Date ▼	
Primary General	riggregate		1
Other (specify)		1000.00	
Full Name (Last, First, Middle Initial) Gunar G. Mezaraups	•		Date of Receipt
Mailing Address 2463 Westlake Drive			01 18 2007
City	State	Zip Code	Transaction ID: 18488913
Austin	TX	78746-2951	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1000.00
Name of Employer Austin Radiological Assoc-	Occupation		
iation Receipt For:	Radiolog	ist e Year-to-Date ▼	_
Primary General	riggrogate		1
Other (specify) ▼		1000.00	
SUBTOTAL of Receipts This Page (optional)			3000.00
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SCHEDULE A (FEC Form	3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 77 / 128
ITEMIZED RECEIPTS	,	or each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12
Any information copied from such Reports	and Statements may	not be sold or used by any perso	n for the purpose of soliciting contributions
	ing the name and add	dress of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American College of Radiology A	Association		
Full Name (Last, First, Middle Initial) A. Andrea Michel			Date of Receipt
Mailing Address 10816 Broken Br			01 18 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Austin	State TX	Zip Code 78726-1904	Transaction ID: 18488914
FEC ID number of contributing federal political committee.	C	70720-1904	Amount of Each Receipt this Period 1000.00
Name of Employer Austin Radiological Assoc- iation	Occupation Radiolog		
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) B. DR Robert Milman			Date of Receipt
Mailing Address 6409 Williams R	idge Way		01 18 7 2007
City	State	Zip Code	Transaction ID: 18488915
Austin	TX	78731-2709	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1000.00
Name of Employer Austin Radiological Assoc.	Occupation	n ic Radiologist	
Receipt For:		Year-to-Date ▼	_
Primary General Other (specify) ▼		1000.00	
Full Name (Last, First, Middle Initial) DR Elizabeth Moorehead	<u> </u>		Date of Receipt
Mailing Address 8206 Sandalwoo	d Cove		0 1
City	State	Zip Code	Transaction ID: 18488916
Austin	TX	78757-7522	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1000.00
Name of Employer Austin Radiological Assoc-	Occupation	n ic Radiologist	
<u>iates</u> Receipt For:		Year-to-Date V	
Primary General Other (specify) ▼	1.33.33410	1000.00	
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S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 78 / 128
	EMIZED RECEIPTS		or each category of the	(check only one) X 11a 11b 11c 12
			Detailed Summary Page	13 14 15 16 17
Ar or	ny information copied from such Reports and Stat for commercial purposes, other than using the na	ements may	not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
<u> </u>	NAME OF COMMITTEE (In Full)			
\rangle	American College of Radiology Associat	ion		
۹.	Full Name (Last, First, Middle Initial) DR James Moyle			Date of Receipt
	Mailing Address 200 W 32nd St			01 18 2007
	City	State	Zip Code	Transaction ID: 18488917
	Austin	TX	78705-2304	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		1000.00
	Name of Employer Austin Radiological Assoc-	Occupation	n ic Radiologist	
	iates Receipt For:		Year-to-Date ▼	
	Primary General			
	Other (specify) ▼	0 0	1000.00	
3.	Full Name (Last, First, Middle Initial) DR Jason Naples			Date of Receipt
	Mailing Address 6621 N Los Leones Dr			01 18 7 2007
	City	State	Zip Code	Transaction ID: 18488919
	Tucson	AZ	85718-1807	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer Austin Radiological Assoc-	Occupation		
	iation Receipt For:		ic Radiology Year-to-Date ▼	_
	Primary General	Aggregate		
	Other (specify) ▼	0 0	1000.00	
. Э.	Full Name (Last, First, Middle Initial) DR David Nichols			Date of Receipt
	Mailing Address 4507 River Wood Court			0 1 1 8 2 0 0 7
	City	State	Zip Code	Transaction ID: 18488920
	Austin	TX	78731-4518	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		1000.00
	Name of Employer Austin Radiological Assoc-	Occupation		7
	iates		ic Radiologist	4
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	
	Other (specify) ▼		1000.00	
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5	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	(check only one)
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			Detailed Summary Page	13 14 15 16 17
۸r	y information copied from such Reports and St	atomonte may	, not be cold or used by any perc	
or	for commercial purposes, other than using the	name and add	dress of any political committee to	o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
$ \rangle$	American College of Radiology Associa	ation		
	American College of Hadiology Associa	ation		
<u>/</u>	Full Name (Last, First, Middle Initial)			
A.	DR Debra Pennington			Date of Receipt
	Mailing Address 2721 Bartons Bluff Ln			M M / D D / Y Y Y Y
				01 18 2007
	City	State	Zip Code	Transaction ID: 18488921
	Austin	TX	78746-7988	Amount of Each Receipt this Period
	FEC ID number of contributing			1000.00
	federal political committee.	C		1000.00
				_
	Name of Employer Austin Radiological Assoc-	Occupation		
	iation		ic Radiologist	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General		1000.00	11
	Other (specify)			1
R	Full Name (Last, First, Middle Initial) DR F Pfeifer, II			Date of Receipt
υ.	Mailing Address 9431 Bing Cherry Ln			M M / D D / Y Y Y Y
	Maining Address 9431 Bing Cherry Lin	01 18 2007		
	City	State	Zip Code	Transaction ID: 18488922
	Austin	TX	78750-3412	Amount of Each Receipt this Period
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	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer Austin Radiological Assoc-	Occupation	n	
	iation	Diagnost	ic Radiologist	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General		1000.00	1
	Other (specify)		1000.00	
C	Full Name (Last, First, Middle Initial) DR Wilbert Polson			Date of Receipt
٥.	Mailing Address 2403 Camino Alto			M M / D D / Y Y Y Y
	Walling Address 2405 Carrillo Allo			01 18 2007
	City	State	Zip Code	Transaction ID: 18488923
	Austin	TX	78746-2406	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		1000.00
	Name of Employer Austin Radiological Assoc-	Occupation		
	iation		ic Radiologist	_
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General		1000.00	11
	Other (specify)		1000.00	1
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				3000.00
S	UBTOTAL of Receipts This Page (optional)			3000.00
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S	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 80 / 128
	· ·		Use separate schedule(s) or each category of the	(check only one)
П	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
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Ar	y information copied from such Reports and Sta	atements may	not be sold or used by any perso	on for the purpose of soliciting contributions
or	for commercial purposes, other than using the	name and add	dress of any political committee to	solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
	American College of Radiology Associa	ation		
Α.	Full Name (Last, First, Middle Initial) DR Russell Putnam			Date of Receipt
	Mailing Address 12243 Trautwein Rd			01 18 2007
	City	State	Zip Code	Transaction ID: 18488924
	Austin	TX	78737-9365	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer Austin Radiological Assoc-	Occupation	n ic Radiologist	7
	iation Receipt For:		Year-to-Date ▼	
	Primary General	00 0		1
	Other (specify) ▼		1000.00	
В.	Full Name (Last, First, Middle Initial) DR Yvonne Queralt			Date of Receipt
	Mailing Address Austin Radiological Ass			M M / D D / Y Y Y Y
	10900 Stonelake Blvd S			01 18 2007
	City	State	Zip Code	Transaction ID: 18488925
	Austin	TX	78759-5826	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		1000.00
	Name of Employer	Occupation	า	
	Austin Radiological Association		ic Radiologist	
	Receipt For:		Year-to-Date ▼	
	Primary General		1000.00	1
	Other (specify)	0 0	1000.00	
_	Full Name (Last, First, Middle Initial)			
C.	DR Andrew Reifsnyder			Date of Receipt
	Mailing Address Austin Radiological Ass 10900 Stonelake Blvd S			01 18 2007
	City	State	Zip Code	Transaction ID: 18488926
	Austin	TX	78759-5826	Amount of Each Receipt this Period
	FEC ID number of contributing			1000.00
	federal political committee.	C		1000.00
	Name of Employer Austin Radiological Assoc	Occupation Diagnosti	ո ic Radiologist	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General		1000.00	1
	Other (specify) ▼		1000.00	
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				3000.00
S	UBTOTAL of Receipts This Page (optional)			3000.00

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 81 / 128
	EMIZED RECEIPTS		or each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12
			, ,	13 14 15 16 17
An or	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may ame and add	not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{}$	NAME OF COMMITTEE (In Full)			
\rangle	American College of Radiology Associa	tion		
٩.	Full Name (Last, First, Middle Initial) DR Christopher Richards			Date of Receipt
	Mailing Address Austin Radiological Asso	DC		0 1 1 8 2 0 0 7
	City	State	Zip Code	Transaction ID: 18488937
	Austin	TX	78765-4099	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer Austin Radiological Assoc-	Occupation Radiolog		
	iates Receipt For:		e Year-to-Date ▼	-
	Primary General	199.19		
	Other (specify) ▼	0 0	1000.00	
3.	Full Name (Last, First, Middle Initial) DR Dan Richardson			Date of Receipt
	Mailing Address 8616 Mendocino Dr			01 / 18 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 18488938
	Austin	TX	78735-1423	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer Austin Radiological Assoc-	Occupation		7
	iation		ic Radiologist	
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	
	Other (specify) ▼		1000.00	
 C.	Full Name (Last, First, Middle Initial) DR Will Rodriguez			Date of Receipt
	Mailing Address 1036 Liberty Park Apt 53	3		01 18 2007
	City	State	Zip Code	Transaction ID: 18488939
	Austin	TX	78746-7025	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer	Occupation	1	-
	Name of Employer Austin Radiological Associates		ic Radiologists	
	Receipt For:		e Year-to-Date ▼	
	Primary General		1000.00	
	Other (specify) ▼	0 0	0 0 0 0 0 0	
S	UBTOTAL of Receipts This Page (optional)			3000.00
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SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBI	ER: PAGE 82 / 128				
ıт	EMIZED RECEIPTS		or each category of the	(check only one)					
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Ar or	ny information copied from such Reports and Sta for commercial purposes, other than using the n	tements may ame and add	y not be sold or used by any perso dress of any political committee to	n for the purpose of s solicit contributions f	soliciting contributions rom such committee.				
abla	NAME OF COMMITTEE (In Full)								
$ \rangle$	American College of Radiology Associate	tion							
Α.	Full Name (Last, First, Middle Initial) DR John Rutledge			Date of Receipt	t				
	Mailing Address Austin Radiological Asso PO Box 4099	ос		0 1	18 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
	City	State	Zip Code	Transaction ID	: 18488940				
	Austin	TX	78765-4099		h Receipt this Period				
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	FEC ID number of contributing federal political committee.	C			1000.00				
	Name of Employer Austin Radiological Assoc	Occupatio Diagnost	n ic Radiologist						
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	Primary General	33 -3							
	Other (specify) ▼		1000.00						
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— В.	Full Name (Last, First, Middle Initial) DR Rodney Schmidt			Date of Receipt	t				
	Mailing Address 1938 Holly Hill Dr Apt 13	3		M M / D	D / Y Y Y Y				
	5	0 1	18 2007						
	City	State	Zip Code	Transaction ID	: 18488941				
	Austin	TX	78746-7653		h Receipt this Period				
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	FEC ID number of contributing federal political committee.	C			1000.00				
	Name of Employer Austin Radiological Assoc	Occupatio	n	1					
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	Receipt For:	<u> </u>	e Year-to-Date ▼	-					
	Primary General	1 99 79							
	Other (specify)		1000.00						
			0 0 0 0 0 0 0						
<u> </u>	Full Name (Last, First, Middle Initial) DR Christopher Swanson			Date of Receipt	t				
٠.	Mailing Address 1104 Blanco St			<u> </u>	D / Y Y Y Y				
	Tion Bianco St				18 2007				
	City	State	Zip Code	Transaction ID	: 18488944				
	Austin	TX	78703-4920		h Receipt this Period				
	FEC ID number of contributing			_ /	• • • • • •				
	federal political committee.	C			1000.00				
	Name of Employer Austin Radiological Assoc-	Occupatio	n						
	Austin Radiological Association	Diagnost							
	Receipt For:		e Year-to-Date ▼	7					
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	Other (specify)	1	1000.00						
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	CHEDULE A (FEC Form 3X)		Llas asperata ashadula(a)	FOR LINE NUMBER: PAGE 83 / 128
T	EMIZED RECEIPTS		Use separate schedule(s) or each category of the	(check only one)
	LIVIIZED RECEIP 13		Detailed Summary Page	X 11a 11b 11c 12
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An or f	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may ame and add	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{}$	NAME OF COMMITTEE (In Full)			
\rangle	American College of Radiology Associa	tion		
	Full Name (Last, First, Middle Initial) DR Gabrielle Theriault			Date of Receipt
	Mailing Address 8114 Talbot Ln			01 18 7 2007
	City	State	Zip Code	Transaction ID: 18488945
	Austin	TX	78746-4913	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer Austin Radiological Assoc- iation	Occupation Diagnost	n ic Radiologist	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General		1000.00	1
	Other (specify) ▼	0 0		
3.	Full Name (Last, First, Middle Initial) DR Eugene Tong			Date of Receipt
	Mailing Address 9801 Stonelake Blvd Ap	t 138		01 18 2007
	City	State	Zip Code	Transaction ID: 18488946
	Austin	TX	78759-6593	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		1000.00
	Name of Employer Austin Radiological Assoc-	Occupation		
	iation		ic Radiologist	
			e Year-to-Date ▼	
	Receipt For:	Aggregate		4
		Aggregate	1000.00	
	Receipt For: Primary General	Aggregate	1000.00	Date of Receipt
	Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) DR Anthony Trevino Mailing Address 6802 Finklea Cove			0 1 1 8 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) DR Anthony Trevino Mailing Address 6802 Finklea Cove City	State	Zip Code	M M / D D / Y Y Y Y
	Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) DR Anthony Trevino Mailing Address 6802 Finklea Cove			0 1 1 8 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
C .	Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) DR Anthony Trevino Mailing Address 6802 Finklea Cove City	State	Zip Code	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
C .	Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) DR Anthony Trevino Mailing Address 6802 Finklea Cove City Austin FEC ID number of contributing federal political committee. Name of Employer	State TX C	Zip Code 78730-4913	Transaction ID: 18488947 Amount of Each Receipt this Period
С.	Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) DR Anthony Trevino Mailing Address 6802 Finklea Cove City Austin FEC ID number of contributing federal political committee. Name of Employer Austin Radiological Association	State TX C Occupation Diagnost	Zip Code 78730-4913	Transaction ID: 18488947 Amount of Each Receipt this Period
С.	Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) DR Anthony Trevino Mailing Address 6802 Finklea Cove City Austin FEC ID number of contributing federal political committee. Name of Employer Austin Radiological Association Receipt For:	State TX C Occupation Diagnost	Zip Code 78730-4913	Transaction ID: 18488947 Amount of Each Receipt this Period
С.	Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) DR Anthony Trevino Mailing Address 6802 Finklea Cove City Austin FEC ID number of contributing federal political committee. Name of Employer Austin Radiological Association Receipt For: Primary General	State TX C Occupation Diagnost	Zip Code 78730-4913	Transaction ID: 18488947 Amount of Each Receipt this Period
С.	Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) DR Anthony Trevino Mailing Address 6802 Finklea Cove City Austin FEC ID number of contributing federal political committee. Name of Employer Austin Radiological Association Receipt For:	State TX C Occupation Diagnost	Zip Code 78730-4913 n ic Radiologist e Year-to-Date ▼	Transaction ID: 18488947 Amount of Each Receipt this Period
C .	Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) DR Anthony Trevino Mailing Address 6802 Finklea Cove City Austin FEC ID number of contributing federal political committee. Name of Employer Austin Radiological Association Receipt For: Primary General	State TX C Occupatio Diagnost Aggregate	Zip Code 78730-4913 n ic Radiologist e Year-to-Date ▼ 1000.00	Transaction ID: 18488947 Amount of Each Receipt this Period 1000.00

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 84 / 128	
ITEMIZED RECEIPTS		or each category of the	(check only one)	
ITEMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12	
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Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may	not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee	
NAME OF COMMITTEE (In Full)	Tidino dia dae	are contains position continues to	Construction from Coor Committee.	
American College of Radiology Associ	ation			
American conege of fladiology Associ	ation			
Full Name (Last, First, Middle Initial)				
A. DR Simon Trubek			Date of Receipt	
Mailing Address 4108 Firstview Dr			M M / D D / Y Y Y Y	
Cit.	01-1-	7:- 0 - 4 -	01 18 2007	
City	State TX	Zip Code	Transaction ID: 18488948	
Austin	1/	78731-3904	Amount of Each Receipt this Period	-
FEC ID number of contributing federal political committee.	C		1000.00	
rederal political committee.				_
Name of Employer Austin Radiological Assoc-	Occupation			
iation		ic Radiologist		
Receipt For:	Aggregate	Year-to-Date ▼		
Primary General Other (specify)		1000.00		
Other (specify)		1 1 1 1 1 1 1		
Full Name (Last, First, Middle Initial)				
B. DR Binh Truong			Date of Receipt	
Mailing Address Austin Radiological As	sociates		M M / D D / Y Y Y Y	
PO Box 4099			01 18 2007	
City	State	Zip Code	Transaction ID: 18488955	
Austin	<u>TX</u>	78765-4099	Amount of Each Receipt this Period	
FEC ID number of contributing	С		1000.00	
federal political committee.				_
Name of Employer Austin Radiological Assoc-	Occupation	า		
Austin Radiological Assoc- iates	Diagnost	ic Radiologist		
Receipt For:	Aggregate	Year-to-Date ▼		
Primary General		1000.00		
Other (specify)		1000.00		
Full Name (Last, First, Middle Initial)				
C. DR Mary Winsett			Date of Receipt	
Mailing Address 3405 Northwood Cir			M M / D D / Y Y Y Y	
			01 18 2007	
City	State	Zip Code	Transaction ID: 18488956	
Austin	TX	78703-1004	Amount of Each Receipt this Period	
FEC ID number of contributing	С		1000.00	
federal political committee.				_
Name of Employer Austin Radiological Assoc-	Occupation	า		
iation	Diagnost	ic Radiologist		
Receipt For:	Aggregate	Year-to-Date ▼		
Primary General	' '	1000.00		
Other (specify)	0 0	1000.00		
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SUBTOTAL of Receipts This Page (optional)			3000.00	
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COUEDINE A (EEC Form 2V)				FOR LINE NUMBER: PAGE 85 / 128			
SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	(check only one)			
ITEMIZED RECEIPTS		or each category of the		X 11a 11b 11c 12			
			Detailed Summary Page	13 14 15 16 17			
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or	ny information copied from such Reports and St for commercial purposes, other than using the	name and ado	r not be sold or used by any personal dress of any political committee to	on for the purpose of soliciting contributions oscilcit contributions from such committee.			
\setminus	NAME OF COMMITTEE (In Full)						
	American College of Radiology Associa	ation					
Α.	Full Name (Last, First, Middle Initial) DR Charles Wiseman			Date of Receipt			
	Mailing Address Austin Radiological Ass 10900 Stonelake Blvd S			01 18 2007			
	City	State	Zip Code	Transaction ID: 18488957			
	Austin	TX	78759-5873	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		1000.00			
	Name of Employer Austin Radiological Assoc- iates Receipt For:		n ic Radiologist • Year-to-Date ▼				
	Primary General Other (specify) ▼	Aggregate	1000.00				
— В.	Full Name (Last, First, Middle Initial) DR Rajeev Shah			Date of Receipt			
	Mailing Address 1751 Babcock Rd Apt 8	335		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
	City	State	Zip Code	Transaction ID: 18488958			
	San Antonio	TX	78229-4688	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		1000.00			
	Name of Employer Austin Radiological Assoc- iates		ic Radiologist				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00				
	Full Name (Last, First, Middle Initial) DR Kenneth Mendelson			Date of Receipt			
٠.	Mailing Address 703 Westover Ave			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
	City	State	Zip Code	Transaction ID: 18489999			
	Norfolk	VA	23507-1622	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С		250.00			
	Name of Employer Children's Hospital of the King's Daug Receipt For:		n ic Radiologist y Year-to-Date ▼				
	Primary General Other (specify) ▼	0 0	250.00				
s	UBTOTAL of Receipts This Page (optional)			2250.00			
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PAGE 86 / 128 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 17 13 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American College of Radiology Association Full Name (Last, First, Middle Initial) DR Ronald Baxter Date of Receipt Mailing Address Radiology Associates 2007 19 716 Quincy St Zip Code City State Transaction ID: 18571752 Rapid City SD 57701-3632 Amount of Each Receipt this Period FEC ID number of contributing 598.20 C federal political committee. Name of Employer Radiology Associates Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼ Receipt For: General Primary 598.20 Other (specify) Full Name (Last, First, Middle Initial) B. DR Brian Baxter Date of Receipt Mailing Address 9151 Clarkson Rd 0.1 19 2007 City State Zip Code Transaction ID: 18571753 Rapid City SD 57702-9193 Amount of Each Receipt this Period FEC ID number of contributing C 598.18 federal political committee. Name of Employer Radiology Associates Occupation Diagnostic Radiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 598.18 Other (specify) Full Name (Last, First, Middle Initial) C. DR Timothy Frost Date of Receipt Mailing Address 7660 Elkhart Rd 2007 0.1 19 Citv State Zip Code Transaction ID: 18571754 Rapid City SD 57702-4793 Amount of Each Receipt this Period FEC ID number of contributing 598.18 C federal political committee. Name of Employer Radiology Associates Occupation Diagnostic Radiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 598.18 Other (specify) 1794.56 SUBTOTAL of Receipts This Page (optional)

S	CHEDULE A (FEC Form 3X)	Use separate schedule(s)				FOR LINE NUMBER: PAGE 87 / 128						
ıT	EMIZED RECEIPTS		or each category of	\ /	(check only one)							
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			Detailed Summary	ŭ		13	14		15	16		17
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\setminus	NAME OF COMMITTEE (In Full)											
\rangle	American College of Radiology Associa	ation										
Α.	Full Name (Last, First, Middle Initial) DR Robert Durst, JR				Da	ate of Re	eceipt					
	Mailing Address 3840 Ponderosa Ct) 1		^D /	Y	^Y 2 0 0		
	City	State	Zip Code		Tra	nsactio	n ID:	 185	71755	5		
	Rapid City	SD	57702-6964			nount of					1	
	FEC ID number of contributing federal political committee.	С								598.	- 0	
	Name of Employer Radiology Associates	Occupation	n ic Radiologist									
	Receipt For:	Aggregate	e Year-to-Date ▼									
	Primary General			500.40								
	Other (specify) ▼			598.18								
В.	Full Name (Last, First, Middle Initial) DR Rebecca Belsaas				Da	ate of Re	eceipt					
	Mailing Address 1519 Forest Hills Dr) 1		^D /	Y	200		
	City	State	Zip Code		Tra	nsactio	n ID:	185	71756	3		
	Rapid City	SD	57701-4449		An	nount of	Each	Rece	eipt this	Perioc	l	
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	federal political committee.	C					-			598.	10	
	Name of Employer Radiology Associates	Occupation Diagnost	n ic Radiologist									
	Receipt For:	Aggregate	e Year-to-Date ▼									
	Primary General			598.18								
	Other (specify)	0 0		090.10								
С.	Full Name (Last, First, Middle Initial) DR Thomas Habbe				Da	ate of Re	eceipt					
	Mailing Address 13891Clydesdale Rd) 1		^D /	Y	^Y 2 0 0		
	City	State	Zip Code		Tra	nsactio	n ID:	185	71777	7		
	Rapid City	SD	57702-7339			nount of					l	
	FEC ID number of contributing federal political committee.				1 1				598.	0		
	Name of Employer Radiology Associates	Occupation	n ic Radiologist									
	Receipt For:		e Year-to-Date ▼									
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SCHEDULE A (F	EC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 88 / 128
ITEMIZED RECEIPTS		or each category of the	(check only one)
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Any information copied fro	om such Reports and Statements ma	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITT	<u> </u>		
\	of Radiology Association		
Full Name (Last, First, DR Dennis Nesbit	Middle Initial)		Date of Receipt
	16 Country Club Dr		01 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Rapid City	State SD	Zip Code 57702-5215	Transaction ID: 18571778
FEC ID number of cor	Little of a se	57702-5215	Amount of Each Receipt this Period
federal political commi			598.18
Name of Employer Radiology Associates	Occupation Diagnos	on tic Radiologist	
Receipt For:		e Year-to-Date ▼	
Primary Other (specify)	General	598.18	
Full Name (Last, First, DR Jon Stenberg	Middle Initial)		Date of Receipt
Mailing Address 400	3 N Berry Pine Road		01 19 2007
City	State	Zip Code	Transaction ID: 18571779
Rapid City	SD	57702-1856	Amount of Each Receipt this Period
FEC ID number of cor federal political commi			598.18
Name of Employer Radiology Associates	Occupation		
Receipt For:		tic Radiologist e Year-to-Date ▼	-
Primary	General		1
Other (specify)	0 0	598.18	
Full Name (Last, First, DR Gregory Saffell	Middle Initial)		Date of Receipt
Mailing Address 398	31 Forest Park Cir		01 19 / Y Y Y Y Y
City	State	Zip Code	Transaction ID: 18571780
Rapid City	SD	57702-6927	Amount of Each Receipt this Period
FEC ID number of cor federal political commi			598.18
Name of Employer Radiology Associates	Occupation Diagnos	on tic Radiologist	
Receipt For:		e Year-to-Date ▼	
Primary Other (specify)	General 7	598.18	
SUBTOTAL of Receipts	This Page (optional)		1794.54
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TOTAL This Period (last	t page this line number only)	>	

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 89 / 128
ITEMIZED RECEIPTS		or each category of the Detailed Summary Page	(check only one) X 11a
Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) American College of Radiology Assoc		71	
Full Name (Last, First, Middle Initial) A. DR Janet Shaefer			Date of Receipt
Mailing Address PO Box 1574 City	State	Zip Code	0 1 1 9 2 0 0 7 Transaction ID: 18571781
Rapid City	SD	57709-1574	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		598.18
Name of Employer Radiology Associates	Occupatio Diagnost	n ic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 598.18	
Full Name (Last, First, Middle Initial) B. DR William Zavitz			Date of Receipt
Mailing Address 3980 Corral Dr			01 / 19 / 2007
City Rapid City	State SD	Zip Code	Transaction ID: 18571796
FEC ID number of contributing federal political committee.	C	57702-9283	Amount of Each Receipt this Period 598.18
Name of Employer Radiology Associates, LLC	Occupatio Diagnost	n ic Radiologist	
Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 598.18	
Full Name (Last, First, Middle Initial) DR Josie Alpers			Date of Receipt
Mailing Address 6609 E Split Rock Cir			01 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City <u>Sioux Falls</u>	State SD	Zip Code	Transaction ID: 18571797
FEC ID number of contributing		57110-1306	Amount of Each Receipt this Period
federal political committee.	C		333.43
Name of Employer Med X-Ray	, ,	ic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 333.43	
SUBTOTAL of Receipts This Page (optional)		······	1529.79
TOTAL This Period (last page this line number	only)	_	

S	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER:	PAGE 90 / 128
			Use separate schedule(s) or each category of the	(check only one)	
П	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b	11c 12
			, ,	13 14	15 16 17
An or	y information copied from such Reports and Stat for commercial purposes, other than using the na	ements may ame and add	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting solicit contributions from su	g contributions ch committee.
$\overline{}$	NAME OF COMMITTEE (In Full)				
\rangle	American College of Radiology Associat	ion			
۹.	Full Name (Last, First, Middle Initial) DR Joseph Baka			Date of Receipt	
	Mailing Address 5104 S Daffodil Cir			01 19	2007
	City	State	Zip Code	Transaction ID: 185	
	Sioux Falls	SD	57108-2302	Amount of Each Rece	eipt this Period
	FEC ID number of contributing federal political committee.	С			333.33
	Name of Employer Medical X-Ray Center	Occupation Diagnost	n ic Radiologist		
	Receipt For:	Aggregate	e Year-to-Date ▼		
	Primary General Other (specify) ▼	0 0	333.33		
3.	Full Name (Last, First, Middle Initial) DR Matthew Casey			Date of Receipt	
	Mailing Address 209 W Saint Andrews Dr	•		0 1	2007
	City	State	Zip Code	Transaction ID: 185	71799
	Sioux Falls	SD	57108-2952	Amount of Each Rece	eipt this Period
	FEC ID number of contributing federal political committee.	С			333.33
	Name of Employer Med X-Ray Center, P.C.	Occupation Diagnost	n ic Radiologist		
	Receipt For:	Aggregate	e Year-to-Date ▼		
	Primary General Other (specify) ▼		333.33		
— Э.	Full Name (Last, First, Middle Initial) DR David Bean			Date of Receipt	
	Mailing Address 2301 W Barrington Cir			01 19	2007
	City	State	Zip Code	Transaction ID: 185	
	Sioux Falls	SD	57108-5024	Amount of Each Rece	eipt this Period
	FEC ID number of contributing federal political committee.	С			333.33
	Name of Employer Med X-Ray Center, P.C.	Occupation Diagnost	n ic Radiologist		
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	1	
	Other (specify) ▼		333.33		
S	UBTOTAL of Receipts This Page (optional)		999.99		
T	OTAL This Period (last page this line number on	ly)	>		

SCHEDULE A (FEC Form 3X)				FOR LINE NUMBER: PAGE 91 / 128
•		Use separate schedule(s) or each category of the		(check only one)
ITEMIZED RECEIPTS		Detailed Summary Page		X 11a 11b 11c 12
			Detailed Summary Fage	13 14 15 16 17
Ar	ny information copied from such Reports and St	atements may	not be sold or used by any perso	on for the purpose of soliciting contributions
or	for commercial purposes, other than using the	name and ado	dress of any political committee to	solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full)			
$ \rangle$	American College of Radiology Associa	ation		
	Full Name (Last, First, Middle Initial)			
Α.	DR Sabina Choudhry			Date of Receipt
	Mailing Address Medical X-Ray 1417 S Minnesota Ave			0 1 1 9 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 18571801
	Sioux Falls	SD	57105-1783	Amount of Each Receipt this Period
			07100 1700	Amount of Each recorpt this rende
	FEC ID number of contributing federal political committee.	C		333.33
	Name of Employer Med X-Ray Center, P.C.	Occupation		7
	Descipt For:		Oncologist	
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	
	Other (specify)	' '	333.33	
	Curior (opcomy) •		1 1 1 1 1 1 1	
— В.	Full Name (Last, First, Middle Initial) DR Thomas Cink			Date of Receipt
	Mailing Address Medical X-Ray Center F	PC		M M / D D / Y Y Y Y
	1417 S Minnesota Ave	J		01 19 2007
	City	State	Zip Code	Transaction ID: 18571802
	Sioux Falls	SD	57105-1783	Amount of Each Receipt this Period
	FEC ID number of contributing			200 00
	federal political committee.	C		333.33
	Name of European	Lowers		_
	Name of Employer Med X-Ray Center, P.C.	Occupation	n ic Radiologist	
	Pagaint For:		e Year-to-Date V	
	Receipt For: Primary General	Aggregate	e real-lo-Dale V	,
	Other (specify)		333.33	
	Caller (openity) V	0 0	0 0 0 0 0 0 0	
<u> </u>	Full Name (Last, First, Middle Initial) Dr. Daniel Crosby			Date of Receipt
٠.	Mailing Address 305 W Spyglass Drive			M M / D D / Y Y Y Y
	a g v v v v v v v v v v v v v v v v v v			01 19 2007
	City	State	Zip Code	Transaction ID: 18571803
	Sioux Falls	SD	57108-6412	Amount of Each Receipt this Period
	FEC ID number of contributing			200 00
	federal political committee.	C		333.33
	Name of Employer Med X-Ray Center, P.C.	Occupation		\neg
			ic Radiologist	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General		333.33	1
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S	UBTOTAL of Receipts This Page (optional)		······································	333.33

S	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 92 / 128		
•		Use separate schedule(s) or each category of the		(check only one)		
П	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12		
				13 14 15 16 17		
Ar	y information copied from such Reports and Sta	atements may	not be sold or used by any perso	on for the purpose of soliciting contributions		
or	for commercial purposes, other than using the r	name and add	lress of any political committee to	solicit contributions from such committee.		
	NAME OF COMMITTEE (In Full)					
	American College of Radiology Associa	tion				
Α.	Full Name (Last, First, Middle Initial) DR Edward Czarnecki			Date of Receipt		
	Mailing Address Medical X-Ray Center			M M / D D / Y Y Y Y Y O T O T O T O T O T O T O T O		
	1417 S Minnesota Ave	State	Zip Code			
	City	State	·	Transaction ID: 18571804		
	Sioux Falls	SD	57105-1715	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		333.33		
	Name of Employer Med X-Ray Center, P.C.	Occupation	n ic Radiologist	7		
	Receipt For:		Year-to-Date ▼	+		
	Primary General	33 -3		1		
	Other (specify) ▼	l	333.33			
				1		
В.	Full Name (Last, First, Middle Initial) DR Susan Duffek			Date of Receipt		
	Mailing Address 5501 S Spyglass Cir			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	City	State	Zip Code	Transaction ID: 18571805		
	Sioux Falls	SD	57108-6405	Amount of Each Receipt this Period		
	FEC ID number of contributing					
	federal political committee.	C		333.33		
	Name of Employer	Ossunation		_		
	Name of Employer Med X-Ray Center, P.C.	Occupation	ic Radiologist			
	Receipt For:		Year-to-Date V	_		
	Primary General	Aggregate	Teal to Bate V	1		
	Other (specify) ▼		333.33			
	Full Name (Last First Middle Initial)			1		
C.	Full Name (Last, First, Middle Initial) DR Valdis Dzintars			Date of Receipt		
	Mailing Address 1417 S Minnesota Ave			01 19 2007		
	City	State	Zip Code	Transaction ID: 18571809		
	Sioux Falls	SD	57105-1715	Amount of Each Receipt this Period		
	FEC ID number of contributing			333.33		
	federal political committee.	C		000.00		
	Name of Employer Med X-Ray Center, P.C.	Occupation Diagnost	n ic Radiologist			
	Receipt For:		Year-to-Date ▼			
	Primary General		200.00	1		
	Other (specify) ▼		333.33			
				200.00		
s	UBTOTAL of Receipts This Page (optional)			999.99		
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SCHEDULE A (FEC Form 3X)				FOR LINE NUMBER: PAGE 93 / 128		
ITEMIZED RECEIPTS		Use separate schedule(s) or each category of the		(check only one)		
11	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12		
				13 14 15 16 17		
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the n	itements may ame and ado	rnot be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.		
\vdash	NAME OF COMMITTEE (In Full)					
\rangle	American College of Radiology Associa	tion				
A.	Full Name (Last, First, Middle Initial) DR Kirsten Erickson			Date of Receipt		
	Mailing Address Medical X-Ray Center 1417 S Minnesota Ave			01 19 2007		
	City	State	Zip Code	Transaction ID: 18571810		
	Sioux Falls	SD	57105-1783	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		333.33		
	Name of Employer Medical X-Ray Center	Occupation Diagnosti	n ic Radiologist			
	Receipt For:	Aggregate	Year-to-Date ▼			
	Primary General		333.33	1		
	Other (specify)	0 0	300.00			
В.	Full Name (Last, First, Middle Initial) DR Gary Famestad			Date of Receipt		
	Mailing Address Medical X-Ray Center			M M / D D / Y Y Y		
	1417 S Minnesota Ave		7' 0 1	01 19 2007		
	City	State	Zip Code	Transaction ID: 18571811		
	Sioux Falls	SD	57105-1715	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		333.33		
	Name of Employer Med X-Ray Center, P.C.	Occupation				
	Receipt For:		ic Radiologist Year-to-Date ▼			
	Primary General	Aggregate	rear-to-date V	1		
	Other (specify) ▼	0 0	333.33			
<u> </u>	Full Name (Last, First, Middle Initial) DR Charles Flohr			Date of Receipt		
	Mailing Address 723 E Greenbrier PI			M M / D D / Y Y Y Y Y O D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	City	State	Zip Code	Transaction ID: 18571812		
	Sioux Falls	SD	57108-6421	Amount of Each Receipt this Period		
	FEC ID number of contributing					
	federal political committee.	C		333.33		
	Name of Employer Medical X-Ray Center Receipt For:		n ic Radiologist			
			Year-to-Date ▼			
Primary General			333.33	1		
	Other (specify)		333.33			
s	UBTOTAL of Receipts This Page (optional)			999.99		
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т	OTAL This Period (last page this line number or	nly)				

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER	: PAGE 94 / 128	
ITEMIZED RECEIPTS		or each category of the		(check only one)	
II EIWIZED NECEIP 13		Detailed Summary Page		X 11a 11b	11c 12
				13 14	15 16 17
Ar	y information copied from such Reports and St for commercial purposes, other than using the	atements may	not be sold or used by any perso	on for the purpose of soli	citing contributions
Or		name and add	dress of any political committee to	SOIICIL CONTRIBUTIONS FOR	n such committee.
	NAME OF COMMITTEE (In Full)				
	American College of Radiology Associa	ation			
	Full Name (Last, First, Middle Initial)				
A.	DR Thomas Free			Date of Receipt	
	Mailing Address 3551 S Spencer Blvd			M M / D [
	0::	0	7: 0 1	01 1	
	City	State	Zip Code	Transaction ID: 1	
	Sioux Falls	SD	57103-4654	Amount of Each F	Receipt this Period
	FEC ID number of contributing federal political committee.	С			333.33
	Name of Employer	Occupation	า		
	Name of Employer Medical X-Ray Center	Diagnost	ic Radiologist		
	Receipt For:		Year-to-Date ▼		
	Primary General			1	
	Other (specify) ▼	1	333.33		
				1	
	Full Name (Last, First, Middle Initial)				
В.	DR Christopher Gregory			Date of Receipt	
	Mailing Address 139 W Doral Ct				0 0 0 7
	21:			01 1	
	City	State	Zip Code	Transaction ID: 1	
	Sioux Falls	SD	57108-6413	Amount of Each F	Receipt this Period
	FEC ID number of contributing	С			333.33
	federal political committee.	<u> </u>			
	Name of Employer	Occupation	า		
	Name of Employer Med X-Ray Center, P.C.		ic Radiologist		
	Receipt For:		Year-to-Date ▼		
	Primary General			1	
	Other (specify) ▼	1	333.33		
				1	
_	Full Name (Last, First, Middle Initial)				
C.	DR John Griffin			Date of Receipt	
	Mailing Address Medical X-Ray Center 1417 South Minnesota	Λνοριιο		01 1	
	City 1417 South Minnesota	State	Zip Code		
	Sioux Falls	SD	57105-1783	Transaction ID: 1	
		3D	37103-1783	Amount of Each F	Receipt this Period
	FEC ID number of contributing federal political committee.	C			333.33
	rederai politicai committee.				
	Name of Employer	Occupation	า		
	Medical X-Ray Center	Radiation	n Oncologist		
	Receipt For:	Aggregate	e Year-to-Date ▼		
	Primary General	1 1	200.00	1	
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s	UBTOTAL of Receipts This Page (optional)				999.99
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T	OTAL This Period (last page this line number of	only)	>		

SCH	IEDULE A (FEC Form 3X)			FOR LINE NUMBER	: PAGE 95 / 128
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			Detailed Guillinary Fage	13 14	15 16 17
Any in	nformation copied from such Reports and State	tements may	not be sold or used by any perso	n for the purpose of soli	citing contributions
or for	commercial purposes, other than using the na	ame and add	dress of any political committee to	solicit contributions fron	n such committee.
\ NA	AME OF COMMITTEE (In Full)				
Ar	merican College of Radiology Associat	ion			
/					
-	Il Name (Last, First, Middle Initial)				
_	R Michael Kihne			Date of Receipt	
Ma	ailing Address Medical X-Ray Center			0 1 1 9	2007
	1417 S Minnesota Ave	01-1-	7'- 0-1-		
Cit		State	Zip Code	Transaction ID: 1	
<u>SI</u>	oux Falls	SD	57105-1715	Amount of Each F	leceipt this Period
	C ID number of contributing	С			333.33
tec	deral political committee.	0			
Na	me of Employer	Occupation	า		
Me	ame of Employer edical X-Ray Center		ic Radiologist		
Re	eceipt For:		Year-to-Date ▼		
Ī	Primary General	1.99.19		1	
	Other (specify) ▼		333.33		
Fu	Il Name (Last, First, Middle Initial)				
_	R Thomas Masterson			Date of Receipt	
Ma	ailing Address 700 W Chicory Cir			M M / D D	
	•			01 19	2007
Cit	y .	State	Zip Code	Transaction ID: 1	8571817
<u>Si</u>	oux Falls	SD	57108-2831	Amount of Each F	eceipt this Period
FE	C ID number of contributing				000.00
	deral political committee.	C			333.33
NI -	and Constant		_	_	
ina Me	lme of Employer edical X-Ray Center	Occupation			
			ic Radiologist	_	
Re	eceipt For: Primary General	Aggregate	Year-to-Date ▼		
	Other (specify)	' '	333.33		
	Other (Specify)	0 0			
E	II Name (Last, First, Middle Initial)				
	R Steven McGraw			Date of Receipt	
Ma	ailing Address 27209 Fountain Cir			M M / D D	
				01 19	2007
Cit	<u></u>	State	Zip Code	Transaction ID: 1	8571818
<u>Ha</u>	arrisburg	SD	57032-8122	Amount of Each F	
FF	C ID number of contributing				000.00
	deral political committee.	C			333.33
Na Me	ime of Employer ed X-Ray Center, P.C.	Occupation			
			Oncologist	_	
Re	eceipt For:	Aggregate	Year-to-Date ▼	. [
-	Primary General	' '	333.33		
	Other (specify)	-			
OL IE	TOTAL of Descripto This Boss (series 1)		999.99		
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TOTA	AL This Period (last page this line number or	ну)			

SCHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 96 / 128
	Use separate schedule(s) or each category of the		(check only one)
ITEMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
		Detailed Guillinary Fage	13 14 15 16 17
Any information copied from such Reports and Sta	tements may	y not be sold or used by any perso	on for the purpose of soliciting contributions
or for commercial purposes, other than using the n	ame and add	dress of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full)			
American College of Radiology Associa	tion		
Full Name (Last, First, Middle Initial) A. DR Patrick Nelson			Date of Receipt
Mailing Address Medical X-Ray Center P 1417 S Minnesota Ave	С		01 19 / Y Y Y Y Y 1
City	State	Zip Code	Transaction ID: 18571821
Sioux Falls	SD	57105-1783	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		333.33
Name of Employer Medical X-Ray Center PC	Occupation	n ic Radiologist	
Receipt For:		e Year-to-Date ▼	
Primary General	00 0		1
Other (specify) ▼	0 0	333.33	
Full Name (Last, First, Middle Initial) 3. DR Matthew Pardy			Date of Receipt
Mailing Address 1417 S Minnesota Ave			01 19 / Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 18571822
Sioux Falls	SD	57105-1715	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		333.33
Name of Employer Med X-Ray Center, P.C.	Occupation Diagnost	n ic Radiologist	
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼	0 0	333.33	
Full Name (Last, First, Middle Initial) DR Brad Paulson			Date of Receipt
Mailing Address Medical X-Ray Center 1417 S Minnesota Ave			0 1 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 18571823
Sioux Falls	SD	57105-1783	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		333.33
Name of Employer Medical X-Ray Center	Occupation Diagnost	n ic Radiologist	
Receipt For:		e Year-to-Date ▼	
Primary General			1
Other (specify) ▼		333.33	
SUBTOTAL of Receipts This Page (optional)	999.99		
TOTAL This Period (last page this line number or	nly)		

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 97 / 128 (check only one) X 11a 11b 11c 12
Ar or	ry information copied from such Reports and State for commercial purposes, other than using the na	ements may	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) American College of Radiology Associati		· · ·	
Α.	Full Name (Last, First, Middle Initial) DR Daryl Rife Mailing Address 5705 S Shadow Ridge Av City Sioux Falls FEC ID number of contributing federal political committee. Name of Employer Med X-Ray Center, P.C. Receipt For: Primary General	State SD C Occupation Diagnost	Zip Code 57108-2006 n ic Radiologist e Year-to-Date ▼	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial)		333.33	
3.	DR Robert Schmall Mailing Address 3000 S Saint Francis Ln City	State	Zip Code	Date of Receipt M M
	Sioux Falls FEC ID number of contributing federal political committee.	SD	57103-4666	Amount of Each Receipt this Period
	Name of Employer Med X-Ray Center, P.C. Receipt For: Primary General Other (specify) ▼		n ic Radiologist e Year-to-Date ▼	
) .	Full Name (Last, First, Middle Initial) Dr. Kathleen L. Schneekloth Mailing Address 2005 S Pendar Lane			Date of Receipt M M D D Y Y Y Y Y Y Y Y
	City Sioux Falls	State SD	Zip Code 57105-3022	Transaction ID: 18571827 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. Name of Employer Medical X-Ray Center, P.C.	Occupation		333.33
	Receipt For: Primary General Other (specify) ▼		ic Radiologist e Year-to-Date ▼ 333.33	
s	UBTOTAL of Receipts This Page (optional)			999.99
T	OTAL This Period (last page this line number on	lv)		

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER:	PAGE 98 / 128
	EMIZED RECEIPTS		or each category of the	(check only one)] 44.
•			Detailed Summary Page	X 11a 11b 13 14	11c 12 15 16 17
Ar	ny information copied from such Reports and St	atements may	not be sold or used by any perso	on for the purpose of solicit	tina contributions
or	for commercial purposes, other than using the	name and add	dress of any political committee to	solicit contributions from s	such committee.
	NAME OF COMMITTEE (In Full)				
	American College of Radiology Associa	ation			
^	Full Name (Last, First, Middle Initial) DR Andrew Soye			Date of Receipt	
Α.	Mailing Address Medical X-Ray Center			M M / D D	/ Y Y Y Y Y
	1417 S Minnesota Ave			01 19	2007
	City	State	Zip Code	Transaction ID: 18	
	Sioux Falls	SD	57105-1783	Amount of Each Re	ceipt this Period
	FEC ID number of contributing federal political committee.	C			333.33
	Name of Employer Medical X-Ray Center	Occupation Diagnost	n ic Radiologist		
	Receipt For:	Aggregate	e Year-to-Date ▼		
	Primary General		333.33	1	
	Other (specify)		0 0 0 0 0 0	1	
В.	Full Name (Last, First, Middle Initial) DR Cameron Stokka			Date of Receipt	
	Mailing Address 2716 E Old Orchard Tra	0 1 / D D D 1 9	2007		
	City	State	Zip Code	Transaction ID: 18	571829
	Sioux Falls	SD	57103-4356	Amount of Each Re	ceipt this Period
	FEC ID number of contributing federal political committee.	C			333.33
	Name of Employer Medical X-Ray Center, P.C.	Occupation			
	Receipt For:	_	ic Radiologist e Year-to-Date ▼	_	
	Primary General	Aggregate	F Teal-to-Date V	1	
	Other (specify) ▼	0 0	333.33		
С.	Full Name (Last, First, Middle Initial) DR Randal Welter			Date of Receipt	
٥.	Mailing Address 1004 E Tomar Rd			M M / D D	/ Y 'Y 'Y 'Y
				01 19	2007
	City	State	Zip Code	Transaction ID: 18	
	Sioux Falls	SD	57105-7010	Amount of Each Re	ceipt this Period
	FEC ID number of contributing federal political committee.	C			333.33
	Name of Employer Medical X-Ray Center	Occupation Diagnost	ⁿ ic Radiologist		
	Receipt For:	Aggregate	e Year-to-Date ▼		
	Primary General Other (specify) ▼	' '	333.33		
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s	UBTOTAL of Receipts This Page (optional)				999.99
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T	OTAL This Period (last page this line number of	niy)			

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	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the	FOR LINE NUMBER: PAGE 99 / 128 (check only one)
			Detailed Summary Page	13 14 15 16 17
Ar	ny information copied from such Reports and Stat for commercial purposes, other than using the na	tements may	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full)			
	American College of Radiology Associat	ion		
Α.	Full Name (Last, First, Middle Initial) DR Daryl Wierda			Date of Receipt
	Mailing Address Medical X-Ray Center 1417 South Minnesota A	01 19 7 2007		
	City	State	Zip Code	Transaction ID: 18571831
	Sioux Falls	SD	57105-1783	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		333.33
	Name of Employer Medical X-Ray Center	_	ic Radiologist	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary ☐ General Other (specify) ▼		333.33	
В.	Full Name (Last, First, Middle Initial) DR Terry Yeager			Date of Receipt
	Mailing Address 405 E Saint Andrews Dr			0 1 1 9 2 0 0 7
	City	State	Zip Code	Transaction ID: 18571834
	Sioux Falls	SD	57108-6415	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		333.33
	Name of Employer Medical X-Ray Center, P.C.	Occupation Diagnost	n ic Radiologist	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		333.33	
<u> </u>	Full Name (Last, First, Middle Initial) DR Polly Hansen			Date of Receipt
	Mailing Address 220 Robledo Verde St			0 1 1 9 2 0 0 7
	City	State	Zip Code	Transaction ID: 18571883
	San Antonio	TX	78232-1114	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer M&S Imaging Associates	Occupation Diagnost	n ic Radiologist	
	Receipt For:		e Year-to-Date ▼	
	Primary General Other (specify) ▼		250.00	
s	UBTOTAL of Receipts This Page (optional)			916.66
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SCHEDULE A (FEC Forr	n 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 100 / 128 (check only one)
ITEMIZED RECEIPTS		or each category of the Detailed Summary Page	X 11a 11b 11c 12
Any information copied from such Report for commercial purposes, other than	orts and Statements may	/ not be sold or used by any pers	13 14 15 16 17 on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full)	using the hame and add	diess of any political committee to	o solicit contributions from such committee.
American College of Radiolog	y Association		
Full Name (Last, First, Middle Initial A. DR Lisa Bladt)		Date of Receipt
Mailing Address NE Methodist 8303 Dodge S			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 18571939
<u>Omaha</u>	NE	68114-4199	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Radiology Center Inc.		ic Radiologist	
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼		250.00	
Carlot (openity) \$			-
Full Name (Last, First, Middle Initial B. DR Patricia Davis			Date of Receipt
Mailing Address 1017 Castle Falls Dr NE			0 1
City	State	Zip Code	Transaction ID: 18571940
Atlanta	GA	30329-4117	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer The Emory Clinic	Occupation	n	
·		ic Radiologist	
Receipt For: Primary General	Aggregate	e Year-to-Date ▼	
Other (specify)		250.00	
Full Name (Last, First, Middle Initial DR Kent Powley)		Date of Receipt
Mailing Address 1431 Seymou	r Ct		01 19 2007
City	State	Zip Code	Transaction ID: 18571941
Neenah	WI	54956-4975	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Radiology Associates of			
Appleton Receipt For:		ic Radiologist e Year-to-Date ▼	\dashv
Primary General	Aggregate		1
Other (specify) ▼	0 0	250.00	
SUBTOTAL of Receipts This Page (o	ptional)		750.00
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SCHED	ULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER:	PAGE 101 / 128
ITFMI7	ED RECEIPTS		or each category of the	(check only one)	□ □
			Detailed Summary Page	X 11a 11b 14	11c 12 15 16 17
Any informa	tion copied from such Reports and S ercial purposes, other than using the	tatements may	not be sold or used by any personal reason of any political committee to	on for the purpose of solic	citing contributions
	OF COMMITTEE (In Full)	name and add	diess of any political committee to	3 Solicit Contributions from	Such committee.
\	an College of Radiology Associ	ation			
Amend	an obliege of Hadiology Associ	ation			
Full Nam A. DR Antho	ne (Last, First, Middle Initial)			Date of Receipt	
Mailing A	·			M M / D D	/ Y Y Y Y
	20 04.11.011.1			01 19	
City		State	Zip Code	Transaction ID: 1	
<u>Corpus</u>		TX	78412-2612	Amount of Each R	eceipt this Period
	number of contributing olitical committee.	C			350.00
Name of	Employer ly & Imaging of So-	Occupation	า		
<u>uth Texa</u>	ıs, LL		ic Radiologist		
Receipt		Aggregate	e Year-to-Date ▼	_	
	mary General her (specify) ▼		350.00		
	(opcony) \			1	
Full Nam B. DR Layn	ne (Last, First, Middle Initial) e Clemenz			Date of Receipt	
Mailing A	Address 725 River Rd			01 19	2007
City		State	Zip Code	Transaction ID: 1	8571962
<u>Columl</u>	<u>pia</u>	SC	29212-8809	Amount of Each R	eceipt this Period
	number of contributing olitical committee.	C			5000.00
	Employer n Radiology Assoc-	Occupation			
iates			ic Radiologist		
Receipt	ror: mary General	Aggregate	e Year-to-Date ▼	,	
	her (specify)		5000.00		
				-	
Full Nam C. DR Dona	ne (Last, First, Middle Initial)			Date of Receipt	
Mailing A				M M / D D	
		0	7: 0 1	01 19	
City <u>Greenv</u>	ماان	State MS	Zip Code 38701-6980	Transaction ID: 1 Amount of Each R	
	number of contributing		30701-0900	Amount of Each N	· · · · · · ·
	olitical committee.	C			1000.00
Name of	Employer diology Services	Occupation			
			ic Radiologist	_	
Receipt	ror: mary General	Aggregate	e Year-to-Date ▼	,	
	her (specify)		1000.00		
	· · · ·	0 0	<u>v v v 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0</u>	1	
SURTOTA	L of Receipts This Page (optional)		_		6350.00
JOBIOTA	L or receipts This raye (uptional)				
TOTAL TH	is Period (last page this line number	only)			

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 102 / 128
	EMIZED RECEIPTS		or each category of the	(check only one)
•••	EIVIIZED RECEIP I 3		Detailed Summary Page	X 11a 11b 11c 12
				13 14 15 16 17
Ar or	ny information copied from such Reports and Sta for commercial purposes, other than using the i	atements may name and add	/ not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
$ \rangle$	American College of Radiology Associa	ation		
Α.	Full Name (Last, First, Middle Initial) DR Penni Barrett			Date of Receipt
	Mailing Address 5028 E 84th St			0 1 1 9 2 0 0 7
	City	State	Zip Code	Transaction ID: 18578711
	Tulsa	OK	74137-2000	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Radiology Consultants of	Occupation	n	7
	Radiology Consultants of Tulsa	Diagnost	ic Radiologist	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General		1000.00	
	Other (specify) 🔻	0 0	1000.00	
В.	Full Name (Last, First, Middle Initial) DR Marc Soble			Date of Receipt
	Mailing Address 9610 Lineberger Ct			01 19 2007
	City	State	Zip Code	Transaction ID: 18578714
	Brentwood	TN	37027-8470	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		365.00
	Name of Employer ADI - Nashville	Occupation	n ic Radiologist	
	Receipt For:		e Year-to-Date ▼	7
	Primary General Other (specify) ▼		365.00	
<u> </u>	Full Name (Last, First, Middle Initial) DR Charles Tate, III			Date of Receipt
	Mailing Address 1090 SW 15th St			0 1 1 9 2 0 0 7
	City	State	Zip Code	Transaction ID: 18578715
	Boca Raton	FL	33486-6858	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Radiologists of N. Ft. La- uderdale, PA	Occupation Diagnost	n ic Radiologist	
	Receipt For:		e Year-to-Date ▼	7
	Primary General	35 5		1
	Other (specify)		500.00	
[UBTOTAL of Receipts This Page (optional)			1365.00
\vdash	ODITION OF THEOERIPS THIS Page (optional)			

	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 103 / 128 (check only one)
IT	EMIZED RECEIPTS		or each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
An or	y information copied from such Reports and State for commercial purposes, other than using the na	ements may ime and add	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{}$	NAME OF COMMITTEE (In Full)			
\rangle	American College of Radiology Associati	ion		
۹.	Full Name (Last, First, Middle Initial) DR Lorna Sohn Sohn Williams			Date of Receipt
	Mailing Address 16129 Bristol Pointe Dr			01 19 7 2007
	City	State	Zip Code	Transaction ID: 18578716
	Delray Beach	FL	33446-2357	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		365.00
	Name of Employer University of Florida	Occupation Diagnost	n ic Radiologist	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		365.00	
3.	Full Name (Last, First, Middle Initial) DR Linda Brown			Date of Receipt
	Mailing Address 3360 Bridle Run Trl NW	01 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	City	State	Zip Code	Transaction ID: 18579321
	Marietta	GA	30064-1788	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		250.00
	Name of Employer Quantum Radiology Northwe- st	Occupation Diagnosti	n ic Radiologist	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		250.00	
	Full Name (Last, First, Middle Initial) DR John Renz			Date of Receipt
	Mailing Address Mobile Infirmary Medical Center PO Box 2144			01 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 18579323
	Mobile	AL	36652-2144	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		250.00
	Name of Employer Mobile Infirmary Medical	Occupation		7
	Center		ic Radiologist	4
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	1
	Other (specify) ▼		250.00	
S	UBTOTAL of Receipts This Page (optional)			865.00
т	OTAL This Period (last page this line number onl	lv)		

SC	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 104 / 128 (check only one)
ITI	EMIZED RECEIPTS		or each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
An or f	y information copied from such Reports and State or commercial purposes, other than using the nar	ments may ne and ado	r not be sold or used by any perso lress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{}$	NAME OF COMMITTEE (In Full)			
\rangle	American College of Radiology Association	on		
	Full Name (Last, First, Middle Initial) DR Anthony Rizzo			Date of Receipt
	Mailing Address 647 Key Royale Dr			01 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 18579324
	Holmes Beach	FL	34217-1237	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Stoutamyer Strates Schr-	Occupatior Diagnosti	n c Radiologist	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		500.00	
	Full Name (Last, First, Middle Initial) DR Emilio Torres-Reyes			Date of Receipt
	Mailing Address 806 Calle Marginal Urb Ro	01 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	City	State	Zip Code	Transaction ID: 18579903
	Trujillo Alto	PR	00976-2739	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		1000.00
	Self-Employed 1	Occupatior Diagnosti	n c Radiologist	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		1000.00	
	Full Name (Last, First, Middle Initial) DR Stuart Singer			Date of Receipt
	Mailing Address Crouse Irving Memorial Hosp 736 Irving Avenue			01 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 18579906
	Syracuse	NY	13210-1690	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Crouse Invinà Memorial Ho-	Occupation		
	sp		c Radiologist	_
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	1
	Other (specify)	0 0	250.00	
SI	JBTOTAL of Receipts This Page (optional)			1750.00
т(DTAL This Period (last page this line number only	<i>(</i>)	•	

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 105 / 128 (check only one) X 11a 11b 11c 12
				13 14 15 16 17
An or	y information copied from such Reports and Sta for commercial purposes, other than using the na	tements may ame and add	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\ }$	NAME OF COMMITTEE (In Full)			
\rangle	American College of Radiology Associat	ion		
۹.	Full Name (Last, First, Middle Initial) DR William Wallace			Date of Receipt
	Mailing Address 2317 Raintree St NE			01 19 2007
	City	State	Zip Code	Transaction ID: 18579908
	Canton	OH	44705-3143	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		250.00
	Name of Employer Radiology Associates of Canton	Occupation Diagnost	n ic Radiologist	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		250.00	
3.	Full Name (Last, First, Middle Initial) DR Leanne Seeger			Date of Receipt
	Mailing Address David Geffen School of I 200 UCLA Medical Plz S	01 19 2007		
	City	State	Zip Code	Transaction ID: 18580605
	Los Angeles	CA	90095-6952	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		250.00
	Name of Employer UCLA School of Medicine	Occupation Diagnost	n ic Radiologist	
	Receipt For:		Year-to-Date ▼	
	Primary General Other (specify) ▼		250.00	
D.	Full Name (Last, First, Middle Initial) DR Joel Dunnington			Date of Receipt
	Mailing Address MD Anderson Cancer Ce 1515 Holcombe Blvd	enter		01 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 18580607
		TX	77030-4009	Amount of Each Receipt this Period
	Houston	1//		
	FEC ID number of contributing federal political committee.	C		250.00
	FEC ID number of contributing	C	1	
	FEC ID number of contributing federal political committee.	Occupation Diagnost		
	FEC ID number of contributing federal political committee. Name of Employer MD Anderson Cancer Center	Occupation Diagnost	n ic Radiologist	
	FEC ID number of contributing federal political committee. Name of Employer MD Anderson Cancer Center Receipt For: Primary General	Occupation Diagnost	n ic Radiologist Year-to-Date ▼	
SI	FEC ID number of contributing federal political committee. Name of Employer MD Anderson Cancer Center Receipt For: Primary General	Occupation Diagnost Aggregate	n ic Radiologist Year-to-Date ▼ 250.00	750.00

	CHEDULE A (FEC Form 3X)		Use separate schedule(s) or each category of the	FOR LINE NUMBER: PAGE 106 / 128 (check only one)
11	EMIZED RECEIPTS		Detailed Summary Page	X 11a
An or	y information copied from such Reports and Stat for commercial purposes, other than using the na	tements may ame and add	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) American College of Radiology Associat	ion		
<u>΄</u> Α.	Full Name (Last, First, Middle Initial) DR Marvin Rawitch			Date of Receipt
	Mailing Address 24100 D El Toro Rd Ste			01 19 2007
	City Laguna Woods	State CA	Zip Code 92637-3106	Transaction ID: 18580608 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1 1 1 1 1 1	250.00
	Name of Employer Marvin A. Rawitch, M.D., Inc.		ic Radiologist	
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 250.00	
3.	Full Name (Last, First, Middle Initial) DR Howard Ansel			Date of Receipt
	Mailing Address 8310 Cedar Lake Rd S	01 19 2007		
	City Spirit Louis Bork	State	Zip Code	Transaction ID: 18580609
	Saint Louis Park FEC ID number of contributing federal political committee.	C	55426-2418	Amount of Each Receipt this Period 250.00
	Name of Employer University of Minnesota Physicians		ic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
).	Full Name (Last, First, Middle Initial) DR Charles Perme			Date of Receipt
	Mailing Address 800 Apple Hill Rd			0 1
	City Cincinnati	State OH	Zip Code 45228-1002	Transaction ID: 18580611
	FEC ID number of contributing federal political committee.	С	45226-1002	Amount of Each Receipt this Period 500.00
	Name of Employer Anderson Radiology Associ- ates		ic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	
s	UBTOTAL of Receipts This Page (optional)			1000.00
T	OTAL This Period (last page this line number or	ılv)		

S	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER:	PAGE 107 / 128
			Use separate schedule(s) or each category of the	(check only one)	
11	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b	11c 12
				13 14	15 16 17
Ar or	y information copied from such Reports and Staten for commercial purposes, other than using the nam	nents may e and add	r not be sold or used by any perso Iress of any political committee to	n for the purpose of solic solicit contributions from	iting contributions such committee.
$\overline{\ \ }$	NAME OF COMMITTEE (In Full)				
\rangle	American College of Radiology Association	n			
۹.	Full Name (Last, First, Middle Initial) DR Ross Golding			Date of Receipt	
	Mailing Address Reno Diagnostic Center 590 Eureka Ave			01 / 19	2007
	City	State	Zip Code	Transaction ID: 18	
	Reno	NV	89512-3425	Amount of Each Re	eceipt this Period
	FEC ID number of contributing federal political committee.	C			1000.00
	Reno Diagnostic Center	Occupation Diagnosti	n c Radiologist		
			Year-to-Date ▼		
	Primary General	1 1	1000.00	1	
	Other (specify)	0 0	1000.00		
3.	Full Name (Last, First, Middle Initial) DR Herman Flink			Date of Receipt	
	Mailing Address 6454 Dora Drive			01 25	2007
	City	State	Zip Code	Transaction ID: 18	3672768
	Mount Dora	FL	32757-7064	Amount of Each Re	eceipt this Period
	FEC ID number of contributing federal political committee.	C			250.00
	Self-Employed 1	Occupation			
			c Radiologist	_	
	Receipt For: Primary General	Aggregate	Year-to-Date ▼		
	Other (specify) ▼		250.00		
 C.	Full Name (Last, First, Middle Initial) DR Joseph Rusnak			Date of Receipt	
	Mailing Address 2725 Eldridge Road			M M / D D	/ Y Y Y Y
	-			01 25	
	City	State	Zip Code	Transaction ID: 18	
	East Aurora	NY	14052-9680	Amount of Each Re	eceipt this Period
	FEC ID number of contributing federal political committee.	C			250.00
	Self-Employed	Occupation Diagnosti	n c Radiologist		
			Year-to-Date ▼		
	Primary General		250.00	1	
	Other (specify)	0 0	250.00		
s	UBTOTAL of Receipts This Page (optional)				1500.00
			<u> </u>		
T	OTAL This Period (last page this line number only)		>		

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 108 / 128 (check only one) X 11a 11b 11c 12 13 14 15 16 17
An or	y information copied from such Reports and Sta for commercial purposes, other than using the na	tements may ame and add	ly not be sold or used by any persordress of any political committee to	on for the purpose of soliciting contributions
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) American College of Radiology Associate	ion		
	Full Name (Last, First, Middle Initial) DR Gerald McManus Mailing Address 501 NW 47th St City Kansas City FEC ID number of contributing federal political committee. Name of Employer Self-Employed Receipt For: Primary General		Zip Code 64116-4605 n ic Radiologist e Year-to-Date ▼	Date of Receipt M M M / 25 / 2007 Transaction ID: 18672771 Amount of Each Receipt this Period 250.00
3.	Full Name (Last, First, Middle Initial) DR Mark McVee Mailing Address PO Box 4426 City	State	Zip Code	Date of Receipt M M 25 2007
	Soldotna FEC ID number of contributing federal political committee. Name of Employer Central Peninsula General Hosp Receipt For:	AK C Occupation Diagnost	99669-4426	Transaction ID: 18672774 Amount of Each Receipt this Period 250.00
	Primary General Other (specify) ▼	7 tggi ogalio	250.00	
Э.	Full Name (Last, First, Middle Initial) DR Norman Crocker Mailing Address 1387 S Hametown Rd City Copley	State OH	Zip Code 44321-1831	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	FEC ID number of contributing federal political committee.	C	410211001	250.00
	Name of Employer Radiology and Imaging Ser- vices, Inc. Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼		n ic Radiologist e Year-to-Date ▼ 250.00	
SI	JBTOTAL of Receipts This Page (optional)			750.00
T	OTAL This Period (last page this line number or	nly)		

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 109 / 128
	EMIZED RECEIPTS		or each category of the	(check only one)
11	EIVIIZED RECEIPTS		Detailed Summary Page	X 11a
				13 14 15 16 17
Ar or	ny information copied from such Reports and Sta for commercial purposes, other than using the n	tements may ame and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full)			
\rangle	American College of Radiology Associa	tion		
A.	Full Name (Last, First, Middle Initial) DR John Breckenridge			Date of Receipt
	Mailing Address Abington Memorial Hosp 1200 Old York Rd	01 25 7 2007		
	City	State	Zip Code	Transaction ID: 18672776
	Abington	PA	19001-3788	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Abington Memorial Hospital	Occupation Diagnost	n ic Radiologist	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General		050,00	1
	Other (specify)	0 0	250.00	
В.	Full Name (Last, First, Middle Initial) DR Denise Collins			Date of Receipt
	Mailing Address 2813 Amberly Ln			0 1 2 5 2 0 0 7
	City	State	Zip Code	Transaction ID: 18672784
	Troy	MI	48084-2689	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Henry Ford Hospital	Occupation	n ic Radiologist	7
	Receipt For:	<u> </u>	e Year-to-Date ▼	
	Primary General			1
	Other (specify) ▼	0 0	250.00	
<u> </u>	Full Name (Last, First, Middle Initial) DR Vincent Fennell			Date of Receipt
	Mailing Address 137 Saddlebow Rd			M M / D D / Y Y Y Y Y Y Y Y Y Y Z D 0 7
	City	State	Zip Code	Transaction ID: 18672786
	Bell Canyon	CA	91307-1039	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		365.00
	Name of Employer Northridge Hospital	n ic Radiologist	7	
	Receipt For:		e Year-to-Date ▼	
	Primary General	11 1		1
	Other (specify) ▼		365.00	
S	UBTOTAL of Receipts This Page (optional)			865.00
ட	ODITAL OF HOSSIPIO THIS Fage (optional)			

SCHEDULE A (FEC Form 3X)

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBE	R: PAGE 110 / 128
	EMIZED RECEIPTS		or each category of the	(check only one)	
•	LIMIZED REGEM 10		Detailed Summary Page	X 11a 11b	11c 12 15 16 17
Ar	ny information copied from such Reports and Stater	ments may	not be sold or used by any perso		
or	for commercial purposes, other than using the nam	ne and add	lress of any political committee to	solicit contributions fro	om such committee.
$\overline{\ \ }$	NAME OF COMMITTEE (In Full)				
\rangle	American College of Radiology Association	n			
۹.	Full Name (Last, First, Middle Initial) DR Justine Dautenhahn			Date of Receipt	
	Mailing Address 1809 Drury Ln				25 2007
	City	State	Zip Code	Transaction ID:	
	Oklahome City	OK	73116-5311	Amount of Each	Receipt this Period
	FEC ID number of contributing federal political committee.	С			500.00
	Norman Radiológy Services,	Occupation Diagnosti	c Radiologist		
	1110.		Year-to-Date ▼		
	Primary General	1 1	500.00	1	
	Other (specify) ▼		300.00		
3.	Full Name (Last, First, Middle Initial) DR Richard Pearce			Date of Receipt	
	Mailing Address Catawba Radiological Ass PO Box 308	0 1 2	25 2007		
	City	State	Zip Code	Transaction ID:	18672789
	Hickory	NC	28603-0308	Amount of Each	Receipt this Period
	FEC ID number of contributing federal political committee.	С			1000.00
	Catawha Radiological Assoc	Occupation			
	Inc		c Radiologist		
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	,	
	Other (specify) ▼	0 0	1000.00		
).	Full Name (Last, First, Middle Initial) DR Carlton Sexton			Date of Receipt	
	Mailing Address 600 Chestnut Ave			M M / D	25 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID:	18672792
	Towson	MD	21204-3707	Amount of Each	Receipt this Period
	FEC ID number of contributing federal political committee.	С			365.00
	Union Momorial Hospital	Occupation Diagnosti	n c Radiologist		
		Aggregate	Year-to-Date ▼		
	Primary General		365.00	1	
	Other (specify)	0 0	0 0 0 0 0 0		
s	UBTOTAL of Receipts This Page (optional)				1865.00
T	OTAL This Period (last page this line number only)			
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	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 111 / 128 (check only one)
Ar	ny information copied from such Reports and Stateme for commercial purposes, other than using the name	nts may	not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American College of Radiology Association			
Α.	Full Name (Last, First, Middle Initial) DR Keith Ferguson			Date of Receipt
	Mailing Address 4211 Winding Vine Ct			01 25 2007
	City S Brandon F	tate ı	Zip Code 33511-3015	Transaction ID: 18672793
	FEC ID number of contributing federal political committee.		33311-3013	Amount of Each Receipt this Period 365.00
	Radiology Associates of West Florida Dia		n ic Radiologist 9 Year-to-Date ▼ 365.00]
В.	Full Name (Last, First, Middle Initial) DR Daniel Cohen			Date of Receipt
	Mailing Address 1480 Brookfield Road City S	01 25 2007		
		tate A	Zip Code 19067-3930	Transaction ID: 18672812 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		1 1 1 1 1	365.00
	Radiology Affiliates of Central NJ Dia		ic Radiologist	
	Receipt For: Primary General Other (specify) ▼	gregate	Year-to-Date ▼ 365.00	
<u>с</u> .	Full Name (Last, First, Middle Initial) DR George Erbacher			Date of Receipt
	Mailing Address 3211 West 73rd St			01 25 2007
		tate	Zip Code	Transaction ID: 18672813
	Tulsa FEC ID number of contributing federal political committee.	K .	74132-2206	Amount of Each Receipt this Period 250.00
	Diagnostic Imaging Associates Inc.		onal Radiologist Year-to-Date ▼ 250.00	
s	UBTOTAL of Receipts This Page (optional)			980.00
Т	OTAL This Period (last page this line number only)			

COUEDINE A (EEC Form 2V)				FOR LINE NUMBER: PAGE 112 / 128
	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	(check only one)
IT	ITEMIZED RECEIPTS		or each category of the	X 11a 11b 11c 12
			Detailed Summary Page	13 14 15 16 17
Ar	ry information copied from such Reports and Sta	tements may	y not be sold or used by any perso	
or	for commercial purposes, other than using the n	ame and add	dress of any political committee to	solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full)			
\rangle	American College of Radiology Associa	tion		
Α.	Full Name (Last, First, Middle Initial) DR Timothy Propeck			Date of Receipt
	Mailing Address Radiologic Imaging Con 220 Compass Point Dr	sultants		01 25 7 2007
	City	State	Zip Code	Transaction ID: 18672814
	Saint Charles	MO	63301-4405	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Radiologic Imaging Consul- tants	Occupation Diagnosti	n ic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
— В.	Full Name (Last, First, Middle Initial) DR Julie Timins			Date of Receipt
	Mailing Address 20 Footes Ln			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 18672816
	Morristown	NJ	07960-6356	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		700.00
	Name of Employer Self-Employed	Occupation Diagnost	n ic Radiologist	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		700.00	
<u> </u>	Full Name (Last, First, Middle Initial) DR Geoffrey lbbott			Date of Receipt
	Mailing Address MD Anderson Cancer Co 7515 S Main St Ste 300	enter		01 25 7 2007
	City	State	Zip Code	Transaction ID: 18672821
	Houston	TX	77030-4551	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer UT MD Anderson Cancer Cen- ter	Occupation Physicist		
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	
s	UBTOTAL of Receipts This Page (optional)			1450.00
\vdash				_

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 113 / 128
	EMIZED RECEIPTS	or each category of the		(check only one)
••			Detailed Summary Page	X 11a 11b 11c 12 15 16 17
Δr	y information copied from such Reports and Sta	atomonte may	y not be sold or used by any ners	, , , , , , , , , , , , , , , , , , ,
or	for commercial purposes, other than using the	name and ado	dress of any political committee to	o solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full)			
	American College of Radiology Associa	ation		
A.	Full Name (Last, First, Middle Initial) DR Timothy Seline			Date of Receipt
	Mailing Address W6243 Firelane 9			01 25 2007
	City	State	Zip Code	Transaction ID: 18672858
	Menasha	WI	54952-9710	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		365.00
	Name of Employer Radiology Associates of Fox Valley	Occupation Diagnosti	n ic Radiologist	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		365.00	
В.	Full Name (Last, First, Middle Initial) DR Edward Farmlett			Date of Receipt
	Mailing Address 33 Round Bay Rd	M M / D D / Y Y Y Y Y Y Y Y Y Y Z D D 7		
	City	State	Zip Code	Transaction ID: 18672861
	Laconia	NH	03246-2650	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Seacoast Radiology, P.A.	Occupation Diagnosti	n ic Radiologist	
	Receipt For:		Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	250.00	
<u> </u>	Full Name (Last, First, Middle Initial) DR Joseph Mersol			Date of Receipt
	Mailing Address 418 30th St.			01 25 2007
	City	State	Zip Code	Transaction ID: 18672862
	Oakland	CA	94609-3013	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		365.00
	Name of Employer Affiliates in Imaging		ic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 365.00	
s	UBTOTAL of Receipts This Page (optional)			980.00

SCHEDULE A (FEC Form 3X)

PAGE 114 / 128 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American College of Radiology Association Full Name (Last, First, Middle Initial) A. DR Epifanio Militar, JR Date of Receipt Mailing Address 534 Mohawk Drive 0.1 2007 25 Zip Code City State Transaction ID: 18675783 Fonda NY 12068-5507 Amount of Each Receipt this Period FEC ID number of contributing 250.00 C federal political committee. Name of Employer Self-Employed Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼ Receipt For: Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. DR David Yeh Date of Receipt Mailing Address **Edward Hospital** 0.1 25 2007 801 S Washington St City State Zip Code Transaction ID: 18675784 <u>Naperville</u> IL 60540-7499 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer Mayerville Radiologists, Occupation Diagnostic Radiologist Receipt For: Aggregate Year-to-Date V Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) C. DR John Benson Date of Receipt Mailing Address Mt Desert Island Hospital 2007 0.1 25 10 Wayman Ln Citv State Zip Code Transaction ID: 18675791 Bar Harbor ME 04609-1645 Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer Coastal Radiology Occupation Diagnostic Radiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1250.00 SUBTOTAL of Receipts This Page (optional)

COUEDING A /EEC Comm 2V)				FOR LINE NUMBER: PAGE 115 / 128
	CHEDULE A (FEC Form 3X)	Use separate schedule(s)		(check only one)
ΙT	EMIZED RECEIPTS	or each category of the		X 11a 11b 11c 12
			Detailed Summary Page	13 14 15 16 17
Δ	ny information copied from such Reports and Sta	ntomonte may	y not be cold or used by any pers	
or	for commercial purposes, other than using the r	name and add	lress of any political committee to	solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full)			
	American College of Radiology Associa	ation		
Α.	Full Name (Last, First, Middle Initial) DR Alan Mitchell			Date of Receipt
	Mailing Address 800 Ross Ave			01 25 2007
	City	State	Zip Code	Transaction ID: 18675792
	Gillette	WY	82716-4764	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer Self-Employed	Occupation Diagnosti	n c Radiologist	
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	1
	Other (specify) ▼	0 0	1000.00	
В.	Full Name (Last, First, Middle Initial) DR Gary Griffin			Date of Receipt
	Mailing Address 30 Wilson Pond Rd	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	City	State	Zip Code	Transaction ID: 18675794
	Harwinton	CT	06791-2813	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Torrington Radiologists,	Occupation		7
	P.C. Receipt For:		c Radiologist Year-to-Date ▼	_
	Primary General	Aggregate	rear-to-date V	1
	Other (specify)	0 0	250.00	
<u> </u>	Full Name (Last, First, Middle Initial) DR Joseph Painter			Date of Receipt
	Mailing Address 130 Hillsdale St.			M M / D D / Y Y Y Y Y O T O T O T O T O T O T O T O
	City	State	Zip Code	Transaction ID: 18675811
	Hillsdale	MI	49242-1210	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		365.00
	Name of Employer Radiology of South Central Michigan Receipt For:		n c Radiologist Year-to-Date ▼	
	Primary General Other (specify) ▼	33. 234.0	365.00]
s	UBTOTAL of Receipts This Page (optional)			1615.00
\vdash				-

S	CHEDULE A (FEC Form 3X)		11	FOR LINE NUMBER: PAGE 116 / 128
	•		Use separate schedule(s) or each category of the	(check only one)
11	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
				13 14 15 16 17
Ar	y information copied from such Reports and St for commercial purposes, other than using the	atements may	not be sold or used by any person of any person of any political committee to	on for the purpose of soliciting contributions
\	NAME OF COMMITTEE (In Full)	name and add	arcas or arry pointed committee to	Solicit contributions from such committee.
	American College of Radiology Associa	ation		
	American College of Radiology Associa	ation		
Α.	Full Name (Last, First, Middle Initial) DR John McGue			Date of Receipt
	Mailing Address 3768 W Pawnee Dr			M M / D D / Y Y Y Y Y O D D D D D D D D D D D D D D
	City	State	Zip Code	
	LaPorte	IN	46350-7954	Transaction ID: 18675812
		IIN	40000-7904	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer LaPorte Radiology Inc.	Occupation	n ic Radiologist	
	Receipt For:		Year-to-Date V	
	Primary General	7 (99) 094(0	Total to Bate V	1
	Other (specify) ▼		250.00	
В.	Full Name (Last, First, Middle Initial) DR Richard Pitman			Date of Receipt
	Mailing Address 4161 S Summit Ln			M M / D D / Y Y Y Y
				01 25 2007
	City	State	Zip Code	Transaction ID: 18675813
	Columbus	IN	47201-8955	Amount of Each Receipt this Period
	FEC ID number of contributing	С		250.00
	federal political committee.			
	Name of Employer Columbus Regional Hospital	Occupation	า	
	Columbus Regional Hospital	Diagnost	ic Radiologist	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General		250.00	1
	Other (specify)	0 0	200.00	
<u> </u>	Full Name (Last, First, Middle Initial) DR Matthew Kalman			Date of Receipt
J.	Mailing Address 317 Chalk Hill Dr			M M / D D / Y Y Y Y
				01 25 2007
	City	State	Zip Code	Transaction ID: 18675815
	Baltimore	MD	21208-1046	Amount of Each Receipt this Period
	FEC ID number of contributing	С		250.00
	federal political committee.	C		255.55
	Name of Employer American Radiology	Occupation		
			ic Radiologist	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		250.00	
	Strict (openity) \	1	0 0 0 0 0 0 0	1
s	UBTOTAL of Receipts This Page (optional)			750.00
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	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 117 / 128 (check only one)
IT	EMIZED RECEIPTS		or each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
An or	y information copied from such Reports and State for commercial purposes, other than using the na	ements may me and add	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\ }$	NAME OF COMMITTEE (In Full)			
\rangle	American College of Radiology Associati	on		
۹.	Full Name (Last, First, Middle Initial) DR Douglas Wester, JR			Date of Receipt
	Mailing Address Radiology of Huntsville 2006 Franklin St SE Ste 2	200		01 29 7 2007
	City	State	Zip Code	Transaction ID: 18697266
	Huntsville	AL	35801-4537	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Radiology Associates of Huntsville	Occupation Diagnost	n ic Radiologist	
	Receipt For:	Aggregate	e Year-to-Date ▼	7
	Primary General Other (specify) ▼	1 1	500.00	
3.	Full Name (Last, First, Middle Initial) DR Christopher McManus			Date of Receipt
	Mailing Address 304 Spaulding Farm Rd	$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$		
	City	State	Zip Code	Transaction ID: 18697267
	Greenville	SC	29615-6025	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		250.00
	Name of Employer Wake Forest Univ School of Med	Occupation Diagnost	n ic Radiologist	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		250.00	
	Full Name (Last, First, Middle Initial) DR David Buck			Date of Receipt
	Mailing Address 144 Penhurst Dr			01 29 7 2007
	City	State	Zip Code	Transaction ID: 18697271
	Pittsburgh	PA	15235-5320	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Greensburg X-Ray Associat-	Occupation Diagnost	n ic Radiologist	
	es Receipt For:		Year-to-Date ▼	7
	Primary General Other (specify) ▼	0 0	250.00	
S	JBTOTAL of Receipts This Page (optional)			1000.00
_	OTAL This Period (last page this line number onl	w)		

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER:	PAGE 118 / 128
	EMIZED RECEIPTS		or each category of the	(check only one) X 11a 11b	☐ 11c ☐ 12
	_		Detailed Summary Page	13 14	15 16 17
Ar or	ny information copied from such Reports and State for commercial purposes, other than using the na	ements may	not be sold or used by any perso	n for the purpose of solic	iting contributions
<u>.</u>	NAME OF COMMITTEE (In Full)	ine and add	ness of any political committee to	Solicit Contributions from	odon committee.
\rangle	American College of Radiology Associati	on			
۹.	Full Name (Last, First, Middle Initial) DR Michael DeVenny			Date of Receipt	
	Mailing Address 3090 Yorktown Dr			$\begin{array}{c ccccccccccccccccccccccccccccccccccc$	2007
	City	State	Zip Code	Transaction ID: 18	
	Tuscaloosa	AL	35406-2713	Amount of Each Re	eceipt this Period
	FEC ID number of contributing federal political committee.	C			250.00
	Name of Employer The Radiology Clinic	Occupation Diagnosti	n ic Radiologist	7	
	Receipt For:		Year-to-Date ▼		
	Primary General Other (specify) ▼		250.00		
3.	Full Name (Last, First, Middle Initial) DR Bill Warren			Date of Receipt	
	Mailing Address UWMC Box 357115			01 29	
	City	State	Zip Code	Transaction ID: 18	
	Seattle	WA	98195-7115	Amount of Each Re	eceipt this Period
	FEC ID number of contributing federal political committee.	C			250.00
	Name of Employer University of Washington	Occupation			
	Receipt For:		ic Radiologist Year-to-Date ▼	_	
	Primary General	33 -3			
	Other (specify) ▼		250.00		
	Full Name (Last, First, Middle Initial) DR William Herrington			Date of Receipt	
	Mailing Address 1110 Laurel Pl			M M / D D	/ Y Y Y Y Y
	City	State	Zip Code	0 1 2 9 Transaction ID: 18	
	Athens	GA	30606-5789	Amount of Each Re	
	FEC ID number of contributing	C			625.00
	federal political committee.				025.00
	Name of Employer Athens Radiology Associat-	Occupation			
	es Receipt For:		ic Radiologist Year-to-Date ▼	_	
	Primary General	, iggi cgale		ı	
	Other (specify) ▼	0 0	625.00		
s	UBTOTAL of Receipts This Page (optional)		·····		1125.00
т	OTAL This Period (last page this line number onl	v)			
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	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 119 / 128 (check only one) X 11a 11b 11c 12			
An	y information copied from such Reports and Stat for commercial purposes, other than using the na	tements may	not be sold or used by any perso	n for the purpose of soliciting contributions			
$\frac{0}{}$	NAME OF COMMITTEE (In Full) American College of Radiology Associat		iress or any pontical committee to	Solicit contributions from Such committee.			
۹.	Full Name (Last, First, Middle Initial) DR John Lohnes, JR Mailing Address Wichita Radiological Gro	nun PA		Date of Receipt			
	PO Box 8903 City	State	Zip Code	0 1 2 9 2 0 0 7 Transaction ID: 18697279			
	Wichita	KS	67208-0903	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		250.00			
	Name of Employer Wichita Radiological Group PA		ic Radiologist				
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00				
3.	Full Name (Last, First, Middle Initial) DR Shane Kraske			Date of Receipt			
	Mailing Address 37 Columbine Ct		7.0.1	01 29 7 2007			
	City	State	Zip Code	Transaction ID: 18697280			
	Iowa City FEC ID number of contributing federal political committee.	C	52246-8716	Amount of Each Receipt this Period 250.00			
	Name of Employer Radiologic Medical Servic- es, Coralvill		ic Radiologist				
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00				
).	Full Name (Last, First, Middle Initial) DR William Powlis			Date of Receipt			
	Mailing Address Crozer Chester Medical Content Blvd			01 / 29 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
	City Upland	State PA	Zip Code 19013-3995	Transaction ID: 18697283 Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		250.00			
	Name of Employer Southeast Radiology Ltd.		n Oncologist				
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00				
s	SUBTOTAL of Receipts This Page (optional)						
	UBTOTAL of Receipts This Page (optional)		······································	750.00			

COUEDING A (FEC Form 2V)				FOR LINE NUMBER: PAGE 120 / 128
	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	(check only one)
ΙT	EMIZED RECEIPTS		or each category of the	X 11a 11b 11c 12
			Detailed Summary Page	13 14 15 16 17
Δr	ny information copied from such Reports and Sta	atamante may	y not he sold or used by any ners	
or	for commercial purposes, other than using the r	name and add	dress of any political committee to	solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
$ \rangle$	American College of Radiology Associa	ation		
	American College of Hadiology Associa	ation		
<u>/</u>	Full Name (Last, First, Middle Initial)			
A.	DR Curtis Poor			Date of Receipt
	Mailing Address 2415 Eagle Cir			M M / D D / Y Y Y
				01 29 2007
	City	State	Zip Code	Transaction ID: 18697285
	Bettendorf	IA	52722-6202	Amount of Each Receipt this Period
	FEC ID number of contributing			050.00
	federal political committee.	C		250.00
	Name of Employer Radiology Group PC SC	Occupation		
			ic Radiologist	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General		250.00	1
	U Other (specify) ▼		250.00]
_	Full Name (Last, First, Middle Initial)			Data of Baselat
В.				Date of Receipt
	Mailing Address Indiana University Sch	of Med		01 30 2007
	City 550 University Blvd	State	Zip Code	
	•		•	Transaction ID: 18700897
	Indianapolis	IN	46202-5149	Amount of Each Receipt this Period
	FEC ID number of contributing	C		1000.00
	federal political committee.			
	Name of Employer	Occupation	า	\neg
	Indiana University Sch of Med		ic Radiologist	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General			7
	Other (specify) ▼		1000.00	
				*
_	Full Name (Last, First, Middle Initial)			
C.	DR Glenn Strome			Date of Receipt
	Mailing Address 359 Diamond St			M M / D D / Y Y Y Y
	0"	0		01 30 2007
	City	State	Zip Code	Transaction ID: 18700898
	San Francisco	CA	94114-2820	Amount of Each Receipt this Period
	FEC ID number of contributing	С		250.00
	federal political committee.			255.55
	Name of Employer	Occupation	 1	\dashv
	Chattanooga Imaging		ic Radiologist	
	Receipt For:		Year-to-Date ▼	\dashv
	Primary General	, .gg, ogale		7
	Other (specify)		250.00	
		0 0	1 1 1 1 1 1 1	-
	I			
_	LIPTOTAL of Possints This Dags (anticard)			1500.00
\vdash	UBTOTAL of Receipts This Page (optional)			
				and the second s

COUEDING A /FEC Form 2V)				FOR LINE NUMBER: PAGE 121 / 128
	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	(check only one)
IT	EMIZED RECEIPTS		or each category of the	X 11a 11b 11c 12
			Detailed Summary Page	13 14 15 16 17
Δr	ny information copied from such Reports and Sta	atomonte may	y not be sold or used by any pers	
or	for commercial purposes, other than using the r	name and add	dress of any political committee to	o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
$ \rangle$	American College of Radiology Associa	ntion		
	runonoun comogo or ruanology riscoolo			
_	Full Name (Last, First, Middle Initial)			
A.	DR Hector Ramirez, JR			Date of Receipt
	Mailing Address 7179 SE 94th Ln			M M / D D / Y Y Y Y
	011	01-1-	7'- 0-4-	01 30 2007
	City	State	Zip Code	Transaction ID: 18700899
	Ocala	FL	34472-9245	Amount of Each Receipt this Period
	FEC ID number of contributing	С		250.00
	federal political committee.	<u> </u>		
	Name of Employer Radiology of Huntsville,	Occupation	1	\dashv
	Radiology of Huntsville, PC	Diagnost	ic Radiologist	
	Receipt For:		Year-to-Date ▼	
	Primary General	00 0		7
	Other (specify)		250.00	
				4
	Full Name (Last, First, Middle Initial)			
В.	DR Lorraine Vazquez de Corral			Date of Receipt
	Mailing Address La Colina Calle St B23	M M / D D / Y Y Y Y Y		
	011	01 30 2007		
	City	State	Zip Code	Transaction ID: 18701097
	Guaynabo	PR	00969-3202	Amount of Each Receipt this Period
	FEC ID number of contributing	С		250.00
	federal political committee.			
	Name of Employer Doctors' Center Hospital	Occupation	ı	
	Doctors' Center Hospital	Diagnost	ic Radiologist	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General		250.00	7
	Other (specify) ▼		250.00]
C	Full Name (Last, First, Middle Initial) DR Rudy VanHemert			Date of Receipt
٥.	Mailing Address 74 Sologne Cir			M M / D D / Y Y Y Y
	74 Sologne Oil			01 30 2007
	City	State	Zip Code	Transaction ID: 18701098
	Little Rock	AR	72223-8914	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		250.00
	Name of Franksian	10		_
	Name of Employer University of Arkansas	Occupation	n ic Radiologist	
	Possint For:			_
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	-
	Other (specify)		250.00	
	Calci (Specify) \	0 0	0 0 0 0 0 0 0	4
,	UBTOTAL of Receipts This Page (optional)			750.00
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C	CHEDIII E A /EEC Form 2V)			FOR LINE NUMBER: PAGE 122 / 128		
SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	(check only one)		
ITEMIZED RECEIPTS			or each category of the	X 11a 11b 11c 12		
			Detailed Summary Page	13 14 15 16 17		
۸r	ny information copied from such Reports and Sta	atomonte may	y not be cold or used by any person			
or	for commercial purposes, other than using the r	name and add	dress of any political committee to	solicit contributions from such committee.		
\setminus	NAME OF COMMITTEE (In Full)					
	American College of Radiology Associa	ation				
Α.	Full Name (Last, First, Middle Initial) DR David Magarik			Date of Receipt		
	Mailing Address 161 Cheifton PI			0 1 3 0 Y Y Y Y Y		
	City	State	Zip Code	Transaction ID: 18701099		
	Winchester	VA	22602-2510	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		250.00		
	Name of Employer Self-Employed		ic Radiologist			
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	1		
	Other (specify) ▼		250.00			
_						
В.	Full Name (Last, First, Middle Initial) DR David Hassell			Date of Receipt		
	Mailing Address Radiology Associates of Mobile			01 30 2007		
	6576 Airport Blvd Bldg C Ste 2 City State Zip Code					
	Mobile	AL	•	Transaction ID: 18701100		
		AL	36608-3786	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		365.00		
	Name of Employer Radiology Associates of	Occupation	1			
	Mobile		ic Radiologist			
	Receipt For:	Aggregate	Year-to-Date ▼			
	Primary General		365.00			
	Other (specify)	0 0		1		
<u> </u>	Full Name (Last, First, Middle Initial) DR Anthony DeRaimo			Date of Receipt		
	Mailing Address Pensacola Radiology Consult PO Box 9210		01 30 2007			
	City	State	Zip Code	Transaction ID: 18701101		
	Pensacola	FL	32513-9210	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		250.00		
	Name of Employer Pensacola Radiology Consu- It		ic Radiologist			
	Receipt For:	Aggregate	Year-to-Date ▼			
	Primary General	' '	250.00	1		
	Other (specify)		250.00	1		
_	UDTOTAL (D. 11. TV T. 11. TV T. 11. TV			865.00		
	UBTOTAL of Receipts This Page (optional))			

SCHEDULE A (FEC Form 3X)				FOR LINE NUMBER: PAGE 123 / 128
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ITEMIZED RECEIPTS			Detailed Summary Page	X 11a 11b 11c 12
			, ,	13 14 15 16 17
Ar	ny information copied from such Reports and St for commercial purposes, other than using the	atements may	not be sold or used by any person	on for the purpose of soliciting contributions
or	11 ,	name and add	aress or any political committee to	solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
\angle	American College of Radiology Associa	ation		
Α.	Full Name (Last, First, Middle Initial) DR John Selby, JR			Date of Receipt
	Mailing Address MUSC/Box 250322 169 Ashley Ave			01 30 2007
	City	State	Zip Code	Transaction ID: 18701102
	Charleston	SC	29403-5836	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		250.00
	Name of Employer Medical University of Sou-	Occupation	n ic Radiologist	
	th Carolina Receipt For:		e Year-to-Date ▼	
	Primary General	7.99.094.0		1
	Other (specify) ▼		250.00	
			0 0 0 0 0 0 0	4
В.	Full Name (Last, First, Middle Initial) DR Douglas Sheft			Date of Receipt
	Mailing Address 11 Corte Palos Verdes			M M / D D / Y Y Y Y
				01 30 2007
	City	State	Zip Code	Transaction ID: 18701104
	Tiburon	CA	94920-2013	Amount of Each Receipt this Period
	FEC ID number of contributing			250.00
	federal political committee.	C		250.00
	Name of Employer	Occupation	 n	
	Bay Area Radiology		ic Radiologist	
	Receipt For:		e Year-to-Date ▼	
	Primary General		050.00	1
	Other (specify)	0 0	250.00	
	Full Name (Last, First, Middle Initial)			
C.	DR Tushar Kothari			Date of Receipt
	Mailing Address 2213 Parkrun Ct			01 30 2007
	City	State	Zip Code	Transaction ID: 18701105
	<u>Hebron</u>	KY	41048-8762	Amount of Each Receipt this Period
	FEC ID number of contributing	С		250.00
	federal political committee.			
	Name of Employer Radiology Associates of	Occupation		
	NO. KY		ic Radiologist	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		250.00	
	Other (specify) \	0 0	1 1 1 1 1 1 1	1
,	LIPTOTAL of Possints This Page (entire 1)			750.00
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SCHEDULE A (FEC Form 3X) Use separate schedule(s)			FOR LINE NUMBER: PAGE 124 / 128	
ITEMIZED RECEIPTS			or each category of the	(check only one)
			Detailed Summary Page	X 11a 11b 11c 12
Δ	winformation assisted from such Departs and Chat			13 14 15 16 17
or	y information copied from such Reports and Stat for commercial purposes, other than using the na	ements may ame and add	r not be sold or used by any personal dress of any political committee to	on for the purpose of soliciting contributions oscilicit contributions from such committee.
	NAME OF COMMITTEE (In Full)	_		
\angle	American College of Radiology Associat	ion		
Α.	Full Name (Last, First, Middle Initial) DR Daniel Cohen			Date of Receipt
	Mailing Address 1480 Brookfield Road			01 30 2007
	City	State	Zip Code	Transaction ID: 18701190
	Yardley	PA	19067-3930	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		40.00
	Name of Employer Radiology Affiliates of	Occupation	<u> </u>	7
	Radiology Affiliates of Central NJ	Diagnost	ic Radiologist	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General		405.00	7
	Other (specify)		+05.00	
— В.	Full Name (Last, First, Middle Initial) DR Joel Swartz			Date of Receipt
Ь.	Mailing Address 1210 Page Ter			M M / D D / Y Y Y Y
	City	State	Zip Code	01 30 2007
	Villanova	PA	19085-2132	Transaction ID: 18701225
		1.7	19003-2132	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		40.00
	Name of Employer Self-Employed	Occupation Diagnost	n ic Radiologist	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General		290.00	7
	Other (specify) ▼	0 0	230.00	J
<u> </u>	Full Name (Last, First, Middle Initial) DR John Thomas			Date of Receipt
	Mailing Address 4 Vineyard Dr			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 18815382
	San Antonio	TX	78257-1235	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer	Occupation	า	7
	South Texas Rádiology Gro- up, P.A.	Diagnost	ic Radiologist	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General		1000.00	1
	Other (specify)		1000.00	1
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s	UBTOTAL of Receipts This Page (optional)			1080.00

183440.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate sc or each category Detailed Summa	ory of the (Check offly offle)				
ny information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions r for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full) American College of Radiology Associ	iation					
Full Name (Last, First, Middle Initial) Vanguard Mailing Address PO Box 13750		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
City	State Zip Code	Transaction ID: 18987079	_			
Philadelphia FEC ID number of contributing federal political committee.	PA 19101	Amount of Each Receipt this Period 1067.84				
Name of Employer	Occupation					
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	1067.84 Interest				

SUBTOTAL of Receipts This Page (optional)	•	1067.84
TOTAL This Period (last page this line number only)	•	1067.84

SCHEDULE B (FEC Form 3X)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use seperate schedule(s) for each category of the	FOR LINE N	one)	PAGE 126 / 128
	Detailed Summary Page	21b 27	22 X 23 28a 28b	24 25 26 28c 29 30b
Any Information copied from such Reports and State or for commercial purposes, other than using the nar				
NAME OF COMMITTEE (In Full)				
American College of Radiology Association	on			
Full Name (Last, First, Middle Initial) 4. Friends of Senator Rockefeller			Transaction ID: 180	
Mailing Address PO Box 1909			01 16	2007
City Charleston	State Zip Code WV 25327		Amount of Each Disk	bursement this Period
Purpose of Disbursement		011		5000.00
Candidate Name Jay Rockefeller		Category/ Type		
X Senate President	ement For: 2008 (Primary General Other (specify)			
State: WV District: 2				
Full Name (Last, First, Middle Initial) 3. Rick Renzi For Congress			Transaction ID: 182 Date of Disbursemen	nt
Mailing Address P.O. Box 2383			01 / 18	² 2007
City Prescott	State Zip Code AZ 86302		Amount of Each Disl	bursement this Period
Purpose of Disbursement		011		1000.00
Candidate Name Rep. Rick Renzi		Category/ Type		
Senate President	ement For: 2008 Primary General Other (specify)			
State: AZ District: 1				
Full Name (Last, First, Middle Initial) Becerra For Congress			Transaction ID: 183	nt
Mailing Address P.O. Box 261060			01 / 19	y y o o o o
City Los Angeles	State Zip Code CA 90026		Amount of Each Disl	bursement this Period
Purpose of Disbursement		011		5000.00
Candidate Name Rep. Xavier Becerra		Category/ Type		
· -	ement For: 2008 (Primary General Other (specify)			
State: CA District: 31				
SUBTOTAL of Disbursements This Page (optional		<u></u>		11000.00
TOTAL This Period (last page this line number only	· · · · · · · · · · · · · · · · · · ·	•		

SCHEDULE B (FEC Form 3X)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use seperate schedule(s) (check only one)		PAGE 127 / 128	
TEMPLE DIODONOLIVILITIO	Detailed Summary Page	21b 27	22 X 23 28a 28b	24 25 26 28c 29 30k
Any Information copied from such Reports and Stat or for commercial purposes, other than using the na				
NAME OF COMMITTEE (In Full) American College of Radiology Associat	ion			
Full Name (Last, First, Middle Initial) 1. Friends Of Joe Pitts			Transaction ID: 18 Date of Disburseme	ent
Mailing Address PO Box 775			01 23	2007
City Unionville	State Zip Code PA 19375		Amount of Each Dis	bursement this Period
Purpose of Disbursement		011		1000.00
Candidate Name Rep. Joseph R. Pitts		Category/ Type		
Senate President	rsement For: 2008 X Primary General Other (specify) ▼			
State: PA District: 16 Full Name (Last, First, Middle Initial)			Transaction ID: 18	
Friends Of Bud Cramer			Date of Disburseme	ent
Mailing Address P.O. Box 2621	Ctata 7in Coda			
City Huntsville	State Zip Code AL 35804		Amount of Each Dis	bursement this Period
Purpose of Disbursement Candidate Name Rep. Robert E. Cramer, Jr.	C	011 Category/ Type		1000.00
Office Sought: X House Senate President State: AL District: 5	xsement For: 2008 X Primary General Other (specify)	No.		
Full Name (Last, First, Middle Initial) Mchenry For Congress			Transaction ID: 18 Date of Disburseme	
Mailing Address PO Box 1406			01 7 24	['] 2007
City Hickory	State Zip Code NC 28601		Amount of Each Dis	bursement this Period
Purpose of Disbursement		011		1000.00
Candidate Name Rep. Patrick McHenry		Category/ Type		
Senate President	x Primary			
State: NC District: 10				0000.00
SUBTOTAL of Disbursements This Page (optional	l)	<u> </u>		3000.00
TOTAL This Period (last page this line number on	lv)			14000.00

S	CHEDULE B (FEC Form 3X)	Use seperate schedule(s)		NUMBER: PAGE 128/128
IT	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check onl	ly one) 22 23 24 25 26 28a 28b 28c X 29 30b
	y Information copied from such Reports and Stat for commercial purposes, other than using the na	,		
$\overline{\ }$	NAME OF COMMITTEE (In Full)			
/	American College of Radiology Associate	on		
	Full Name (Last, First, Middle Initial)			Transaction ID: 18988005
٩.	Bank of America			Date of Disbursement
	Mailing Address P.O. Box 27025			$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$
	City Richmond	State Zip Code VA 23261-7025		Amount of Each Disbursement this Period
		VA 25201-7025		1791.52
	Purpose of Disbursement bank fees		001	
	Candidate Name		Category/ Type	
		sement For:		bank fees
	Senate	Primary General		
	State: President State: District:	Other (specify)		
	olale. District.			

SUBTOTAL of Disbursements This Page (optional)	•	1791.52
TOTAL This Period (last page this line number only)	<u> </u>	1791.52